DISSERTATION

PREDICTABILITY OF INPATIENT SATISFACTION SCORES BASED ON HOSPITAL CHARACTERISTICS: QUANTITATIVE ANALYSIS OF HCAHPS SURVEY DATA, 7/1/2013 THROUGH 6/30/2014

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ABSTRACT

PREDICTABILITY OF INPATIENT SATISFACTION SCORES BASED ON HOSPITAL CHARACTERISTICS: QUANTITATIVE ANALYSIS OF HCAHPS SURVEY DATA, 7/1/2013 THROUGH 6/30/2014

In the early 21st century, the U.S. healthcare industry is undergoing a myriad of changes that include a focus on reimbursements to hospitals from the Centers for Medicare and Medicaid Services (CMS) based on the perceptions of patients' satisfaction of their care. This study utilizes the survey results as administered through the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS©) survey along with nine hospital characteristics to determine predictive analysis of the scores based on the independent variables.

The quantitative analysis utilized multiple regression to determine statistical significance of the variables and determine if the variables can predict the satisfaction scores. The hospital characteristics chosen include Academic, Baldrige Award, Faith Based, For Profit, MAGNET™, Most Wired™, Safety Net, Sole Provider, and System. The survey data were obtained through CMS's public domain and then filtered for acute care, non-specialty hospitals. With a total list of 3,100 hospitals, each hospital was coded to the unique characteristics.

Once coding was completed, the full dataset was divided into combinations of the variables and data consisting of "All Variables", "Application Variables", "Non-Application Variables", "Low Response Rate on Survey", "Medium Response Rate on Survey", "High Response Rate on Survey", and grouping of hospitals defined by CMS's ten geographical regions. Through these multiple analysis of the data, the researcher was able to search for

themes on the highest Adjusted R^2 to show the predictive power with the intent of identifying a common culture through a high-level characteristic that would be the driver of patient satisfaction.

The findings showed significance in the data, but lower than expected predictability based on the hospital characteristics. The highest predictive variables were from three CMS geographic regions with only one specific survey question, Willingness to Recommend Hospital (all variables). This was an unexpected finding and outside the literature reviewed. It focuses the question on the drivers of patient satisfaction as not associated with the hospital characteristics utilized in this study, but possibly with cultural and demographic issues that could contribute to future work.

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ACRONYMS

AMC – Academic Medical Center

CMS – Centers for Medicare and Medicaid Services

EHR – Electronic Health Record

HCAHPS© - Hospital Consumer Assessment of Healthcare Provider and Services

HHS – Health and Human Services

IHI – Institute for Healthcare Improvement

PPACA – Patient Protection and Affordable Care Act

TPS – Total Performance Score

VBP – Value Based Purchasing

CHAPTER 1 – INTRODUCTION

In the opening lines of her published work, *Notes on Hospitals* (1863), Florence Nightingale states "the very first requirement in a Hospital is that it should do the sick no harm" (p. iii). This thought is echoed in the works and research of her contemporary, Ignaz Semmelweis, and later in the early 20th century by Ernest Codman (Marjoua & Bozic, 2012, p. 265). This basic concept of "do the sick no harm" (1863) continues to evolve to current day with a focus on patient outcomes. By the beginning of the 21st century, this evolution of healthcare quality is seen in the United States with the declaration by the Institute of Medicine that quality is "the degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge" (2012, p. 266). This definition grew from ideas and initiatives of the mid-20th century where healthcare issues were highlighted through actions as peer reviews, Medicare Conditions of Participation, and the creation in 1951 of The Joint Commission with their "rubric of defined minimum quality standards" (2012, p. 266).

Due to continuing focus on clinical outcomes within the country's healthcare system along with growing concern of costs associated with these services, there has been a transition to equate quality of care with patient satisfaction (Zamora, 2012). This is an important understanding when researching the history and current terminology that has led the healthcare industry to its focus today. This study will address the correlation of patient satisfaction as measured by the HCAHPS© (Hospital Consumer Assessment of Provider and Healthcare Services, pronounced *H-CAPS*) survey of inpatient hospital encounters and independent variables that represent hospital traits. The purpose will be to identify contributing factors that may influence patient satisfaction scores based on unique characteristics of hospitals so that

healthcare professionals will have a foundation to target their institutions' cultures and align them with patients' expectations.

It is currently common for the terms *quality* and *satisfaction* to be used interchangeably although there is a strong argument these are two very different variables (Zamora, 2012, p. 119). For consistency in this study, *quality* will be defined as clinical expertise while *satisfaction* will be defined as the patients' perceptions of the quality of their care. The HCAHPS© will be reviewed as it primarily refers to patient satisfaction even though the satisfaction scores are used in quality assessments for the hospitals (Geiger, 2012, p. 11).

Significance of Study

To understand the significance of this study, there is a need to review the origins and changes to healthcare reform law in the first decade of the 21st century. For those who supported the legislation, the change was driven from a perspective of a need to increase coverage for the "uninsured or lower-income group or to provide needed oversight of the healthcare insurance industry" (Huntoon et al., 2011, p. 1), while the opposition was based in the belief "the budget deficit will increase under the new law or create too much government involvement" (2011, p. 1). Interestingly, neither of these concerns from interview polls conducted by the Pew Research Center and the Kaiser Family Foundation (2011, p. 1) documented the need nor the understanding that the newly passed reform would address healthcare outcomes. Because of this omission in the public's understanding of the law, this study will review the related quality and satisfaction drivers and how each of these address a vital feature of clinical outcomes and patient satisfaction. Once this background has been established, the study will focus on how the HCAPHS© survey outcomes impact healthcare delivery for hospitals and what emerges from the patients' perspectives.

Goal of the Patient Protection and Affordable Care Act

After months of political debates, compromises, and modifications (Wicks & Keevil, 2014, p. 420), the Patient Protection and Affordable Care Act (PPACA) was signed into law on March 23, 2010 by President Barack Obama (2010). This legislation represented the greatest overhaul of healthcare in the United States since the passage of the Medicare and Medicaid Act of 1965 (Martin, 2015, p. 407).

The PPACA has many aspects and addresses a multitude of healthcare improvement issues, and can be summarized as an attempt to impact the "Triple Aim", a 2008 term from the Institute of Healthcare Improvement (IHI) that was used as a guide for reform. The three areas of the "Aim" are commonly referred to as "better care", "better outcomes" at a "lower cost" (Stiefeld & Nolan, 2013, p. 219). Figure 1 shows the model IHI created with its terminology of "population health" (better outcomes), "experience of care" (better care), and "per capita cost" (lower cost) (Institute of Healthcare Improvement, 2015). Regardless of the terminology used for each area, the idea conveyed remains consistent and shows the magnitude of scope the PPACA attempts to address.

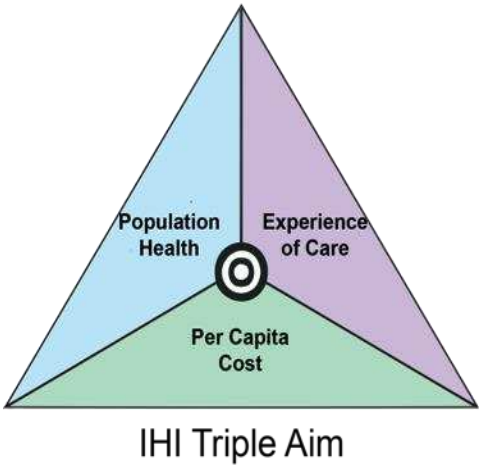

Figure 1 - The Institute of Healthcare Improvement Triple Aim

From a healthcare or organizational perspective, the model can be viewed in an operational manner as it focuses on areas such as healthcare coverage access points, consumer protection within the healthcare industry, and incentives/penalties directed toward healthcare organizations and providers to move away from a fee-for-service model (payment is needed for every clinical encounter) toward a pay-for-performance scenario (payment is made based on the overall health of the population) (Martin, 2015, p. 408).

Overview of Value-Based Purchasing

From Section 3001 of the PPACA (2010), the introduction of Value Based Purchasing (VBP) stated:

> The Secretary of HHS is required to establish a hospital Value-Based Purchasing program under which value-based incentive payments are made in a fiscal year to hospitals that meet certain performance standards during that fiscal year. The program will apply to payments for discharges occurring on or after October 1, 2012.

This definition is a very broad introduction to a far-reaching topic and gives the direction VBP is intended to address payments to hospitals for services when they attain goals based on their individual performance measured against their ability to meet certain performance standards. It is an effort to focus healthcare delivery on "value over volume" and "quality over quantity" as stated by Eldridge and Korda (2011, p. e313). Since the United States spends more on healthcare than any other nation, but lags behind other developed countries on performance measures, the goal of performance-based analysis has become paramount to the healthcare overhaul (Kavanagh, Cimiotti, Abusalem, & Coty, 2012, p. 385). The complexity of understanding this topic increases in that VBP has become a generic term to represent an overall movement toward increased performance metrics (2011, p. e313), but in reality, it is a very specific item that was included in the PPACA that authorizes Congress (through the Department of Health and Human Services) to address inpatient participating hospitals (hospitals that receive

federal reimbursements) to apply processes that equate the hospital-received reimbursements with defined quality measures crossing multiple domains (Centers for Medicare and Medicaid Services, 2014).

For fiscal year 2015, Value-Based Purchasing is defined by CMS as a calculation of four unique domains to reflect the quality and productivity of aggregated patient encounters to create a value index to be utilized after an across-the-board reduction in federal reimbursements was applied. The reduction begins the incentive/penalty aspect of the VBP program where the amount of reduction increases based on the fiscal year through 2017 (Centers for Medicare and Medicaid Services, 2013). The specific reduction amounts are:

- FY 2012: Base Year
- FY 2013: 1.00 percent
- FY 2014: 1.25 percent
- FY 2015: 1.50 percent
- FY 2016: 1.75 percent
- FY 2017 and subsequent years: 2.00 percent.

An important concept of the VBP process is all participating hospitals automatically lose upfront the defined percentage of their federal reimbursements. The VBP program allows them to "earn back" the amount lost and actually gain an amount based on strong performance from these metrics. The other side to this issue is if hospitals do not have strong metrics from the VBP outcomes they will stay at the lower reimbursement rate if they do not have performance improvements better than other hospitals or may have additional "takeaways" from their reimbursements if they do not improve over their initial baseline (Ryan, 2013, p. 2473).

The four domains used to calculate the VBP are the Clinical Process of Care Domain, the Patient Experience of Care Domain, the Outcome Domain, and the Efficiency Domain. Based on a weighted distribution of each these four variables, a Total Performance Score (TPS) is generated to create a performance index that is applied to the individual hospital's

reimbursement to determine an increase (what they "earn back") from their original reduction or an additional decrease (what is another "takeaway") in federal money that will be received (Centers for Medicare and Medicaid Services, 2013).

Although each domain addresses a unique aspect of care delivery, it is the second domain, Patient Experience of Care that will be the focus in this study. By understanding drivers of this domain, hospitals can grasp a greater appreciation for how their employees, facilities, and protocols are perceived by their patients' responses to the HCAHPS© survey. This will provide direction to the hospitals to initiate changes needed to address these concerns.

The Patient Experience of Care Domain from the VBP is one of the more controversial domains within the calculation of VBP. Its premise is that if payers are paying for quality, then quality should be view not only as the clinical outcomes. Instead, it should also address perceptions the patients have of the care they received from their hospital experience (Huppertz & Smith, 2014).

Research Questions

The primary construct that will be addressed is patients' perception of care derived from their hospital experience for all survey questions within the HCAHPS© domains (not to be confused with domains as defined within the overall VBP calculation). Nursing Communication, Doctor Communication, Responsiveness of Hospital Staff, Pain Control, Facility Cleanliness, Facility Quietness, Medication Education, Discharge Instructions, Care Transitions, Overall Hospital Rating, and Willingness to Recommend are the domains within the HCAHPS© tool (Hospital Consumer Assessment of Healthcare Providers and Systems, 2014).

The overarching research question is "what hospital characteristics are predictors of patient satisfaction scores?". To break this primary research question down into multiple

focused questions, Table 1 shows the complexity of how the domains in the HCAPHS© survey and the combination of the independent variables create a matrix for analysis that will be performed.

Table 1 - Detailed research questions between HCAHPS© domains and hospital characteristics

Single Predictor for Score by Domain	Combination of Predictors for Score by Domain
What is the primary hospital characteristic that predicts the patient satisfaction score for…	What is the combination of hospital characteristics that predict the patient satisfaction score for…
• Nursing communication? • Doctor communication? • Responsiveness of hospital staff? • Pain control? • Facility cleanliness? • Facility quietness? • Medication education? • Discharge instructions? • Care transitions? • Overall hospital rating? • Willingness to recommend hospital?	• Nursing communication? • Doctor communication? • Responsiveness of hospital staff? • Pain control? • Facility cleanliness? • Facility quietness? • Medication education? • Discharge instructions? • Care transitions? • Overall hospital rating? • Willingness to recommend hospital?

The relationships that will be examined in this analysis can be represented in the conceptual framework in Figure 2. The goal of this interpretation is to show the building blocks of the unique aspects involved in determining the contribution to patients' perception care in the hospital.

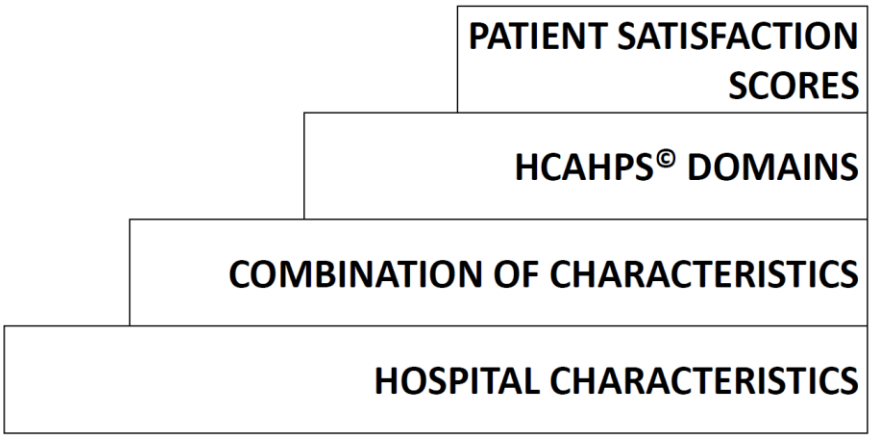

Figure 2 - Conceptual Framework of Building Patient Satisfaction Scores.

The goal of this representation is to show patients' satisfaction scores are viewed as a culmination of external measurement inputs. By providing quantitative data to these inputs, their relationship to the patient satisfaction scores can be ascertained. Chapter 3 includes the "Combination of Characteristics" for all possible groupings.

Study Variables

Independent Variable Definitions

This study will refer to the nine variables below as hospital characteristics that will be utilized as the independent variables.

Academic Medical Center: An owned or a closely affiliated hospital, health system, or an organized healthcare provider network. This designation identifies an accredited, degree-granting institution of higher education that includes a medical school and a health professional school (Wartman, 2007, p. 1).

Malcolm Baldrige National Quality Award (Baldrige Award): A quality award established in 1987 by the U.S. Congress to recognize strong process and management that lead to quality outcomes. It is managed by the U.S. Department of Commerce and administered by the American Society for Quality. The healthcare category was added in 1999 and allows hospitals to apply based on the criteria of leadership, strategic planning, customer and market focus, measurement, analysis, knowledge management, human resource focus, process management, and business/organizational performance results (American Society of Quality, n.d.).

Faith Based: Any hospital that has as part of its mission or vision statement a connection of its work as a healthcare provider to a religious leader or a religious group. Examples of this from hospitals include language such as "Rooted in the loving ministry of Jesus the healer", "We

envision a strong, vibrant Catholic health ministry" (both from St. Vincent's Hospital, Birmingham, AL), "extending the healing ministry of Christ" (from Florida Hospital, Orlando, FL), "strengthened by our Jewish and Catholic heritages" (from KentuckyOne Health, Louisville, KY), and "community hospital faithful to its Jewish heritage" (from The Jewish Hospital, Cincinnati, OH). No designation will be made on specific religion, denomination, or sect.

For Profit: A facility that is "either owned by private investors or is owned publicly by shareholders and is part of a company that issues shares of stock to raise revenue to expand the hospital activities" (The Medicare Newsgroup, 2015, p. 1).

Health System: A legal entity that acts as the parent organization to individual hospitals within its reporting structure. Hospitals will be considered to be a member of a health system based on their website information that indicates a network of hospitals acting together with shared resources. An example of this is "Our partnership combines Memorial Health System, based in Colorado Springs, Poudre Valley Health System, based in Fort Collins, and Denver metro-based University of Colorado Hospital" (from University of Colorado Health System, Denver, CO). Additionally, this information can be ascertained through the organization's website in the "Career" section that will display full system job availability or through the "About" section that contains the system name such as Tenet Healthcare or HCA (Hospital Corporation of America).

MAGNET™: A designation awarded through the American Nurses Credential Center that recognizes hospitals that demonstrate "nursing excellence and innovation in professional nursing practice" (American Nurses Credentialing Center, 2014, p. 1)

Most Wired^{TM}: A designation from *Hospitals and Health Networks* (associated with the American Hospital Association) that assesses the information technology sophistication of hospitals within the United States.

Safety Net: A hospital that provides "significant level of care to low-income, uninsured, and vulnerable populations" (Gage, n.d., p. 1) and has an open-door policy for hospital services regardless of payment potential. A "substantial" number of the hospital's patients are Medicaid. This can be a difficult definition in that it is more inclusive/broader than the CMS designation of "disproportionate share hospital" (DSH) since 64% of hospitals in the United States receive the DSH reimbursement to some degree, but must have in their mission statement a commitment to providing services to those who cannot find services elsewhere. Because the term *safety net* is a generic term for many different hospitals, this study will use a common delimiter of those hospitals that are in the top quartile of the DSH program so they are coded as a Safety Net hospital.

Sole Provider: A CMS designation for hospitals that meet the following criteria.

- located at least 35 miles from other like hospitals;
- rural (located in a rural area), located between 25 and 35 miles from other like hospitals, and meets one of the following criteria:
    - no more than 25 percent of residents who become hospital inpatients or no more than 25 percent of the Medicare beneficiaries who become hospital inpatients in the hospital's service area are admitted to other like hospitals located within a 35-mile radius of the hospital or, if larger, within its service area;
    - has fewer than 50 beds and would meet the 25 percent criterion above if not for the fact that some beneficiaries or residents were forced to seek specialized care outside of the service area due to the unavailability of necessary specialty services at the hospital;
    - rural and located between 15 and 25 miles from other like hospitals but because of local topography or periods of prolonged severe weather conditions, the other like hospitals are inaccessible for at least 30 days in each of 2 of 3 years;

- rural and because of distance, posted speed limits, and predictable weather conditions, the travel time between the hospital and the nearest like hospital is at least 45 minutes (Department of Health and Human Services, 2014, p. 1).

Top Box Calculation

The "Top Box" designation is the highest scores that can be associated with the HCAHPS© survey domains. CMS reimbursement through the VBP program only considers the Top Box scores for calculation. Hospitals are held accountable for best scores possible instead of scores spanning the full spectrum of possibilities within the associated Likert scales (Iannuzzi, Kahn, Linlin, Gestring, Noyes, & Monson, 2015).

Because some domains within the HCAHPS© survey include multiple questions, the Top Box is calculated based on a mean of the highest scores for the composite questions assigned to each domains. This concept is best understood in Table 2 (Centers for Medicare and Medicaid Services, Summary Analysis, 2015, n.d.)

Table 2 - Top Box domain calculation

Domain	Survey Questions	Top Box Response	Question Classification
Nursing Communication	1, 2, 3	Always	Composite
Doctor Communication	5, 6, 7	Always	Composite
Responsiveness of Staff	4, 11	Always	Composite
Pain Management	13, 14	Always	Composite
Medication Education	16, 17	Always	Composite
Discharge Information	19, 20	Yes	Composite
Cleanliness of Hospital	8	Always	Individual
Quietness of Hospital	9	Always	Individual
Overall Hospital Rating	21	9 or 10	Global
Willingness to Recommend	22	Definitely Yes	Global

Delimitations

The scope of this study will be limited to patient satisfaction scores through the HCAPHS© survey tool (dependent variable) by hospital for the period of 7/1/2013 through 6/30/2014 and the scores' relationship to the hospital characteristics (independent variables). The study will not include an in-depth analysis of why the relationships do or do not exist as that would be beyond the scope of correlation and does not include causation. Additionally, it will not debate the merit of the survey domains or questions. The Literature Review section provides background on these areas for informational purposes, but should not be seen as an endorsement of a specific view on how the survey questions might be altered.

Assumptions

It is assumed the data collection reported from the CMS database is correct and the information available via the public internet for each hospital is representative of the hospitals' characteristics. Additional assumptions for this study are that the Value Based Purchasing program stays in effect with the patient satisfaction score continuing as a dominant factor in its calculation. As the PPACA continues to be a controversial topic, the discussion of its specifics does have some uncertainty, but it is assumed that changes to the PPACA in upcoming administrations will be minor changes or enhancements that will not impact the goal of a pay-for-performance model.

Researcher's Perspective

As a hospital administrator, I approach this study from a practitioner's perspective. The work in which I engage has been directly impacted by the need to address the different aspects of Value Based Purchasing with specific focus on patients' experiences. Additionally, my academic background has increased my interest in performance management with a goal of understanding high-performing organizations. With these two aspects in my life, the outcomes of this research could impact my approach to my work. I entered into this study acknowledging that as an employee of a sole provider, safety net, not-for-profit hospital, I do have biases toward the work done in the hospital where I currently serve. However, my goal is to review all variables based on a strict interpretation of their definitions and utilize the outcomes for analysis on how the hospital characteristics can generate discussion on the processes, training, and protocols that can drive patients' perceptions of their care experience.

CHAPTER 2 – LITERATURE REVIEW

As the United States continues to address healthcare reform issues, one of the driving forces is quality as perceived by patients. The goal is to move the nation's healthcare industry to one that is based on level of care received instead of quantity of care delivered (Thompson, 2011, p. 1062). The literature surrounding this goal is varied and covers multiple perspectives, all of which have pros and cons associated with their methodologies (Donabedian, 2005, p.715). For this study, the focus on the literature associated with patient quality scores will be on the patient as consumer, perceptions/expectations of healthcare quality, the patient experience from narrative and phenomenological perspectives, the relationship of hospital variables (i.e., faith based vs. non-faith based, MAGNET™ vs. non-MAGNET™, Baldrige award vs. non-Baldridge award, healthcare system vs. independent, academic vs. non-academic, for-profit vs. not-for-profit, and "most Wired™" vs. non-"most Wired™") and literature that addresses the domains within the HCAHPS© survey.

The Patient as Consumer

One of the important aspects of healthcare reform is to view the patient as a consumer of healthcare services. Prior to the signing of the formal legislation in 2010, there was a strong emphasis in the literature on the use of "consumer-directed healthcare" (CDHC). This view of healthcare positions the patient as a customer expecting to find the best value for the services received (Buntin et al., 2006, p. 516). Interestingly, the focus of consumer-directed healthcare was directed toward the payor (i.e., insurance companies) and not necessarily the providers. This view allowed for cost to be at the forefront of healthcare discussion, but did not emphasize quality or patient satisfaction issues.

As literature progressed past the PPACA passage, there is a turn toward the full view of consumers' expectations on the appropriate and high level of service; not just a fair price for the service provided. Price (2013) argues that the care received by the patient and the payment associated with that care is now viewed as a marketplace transaction. He argues that within this consumer transaction, there are specific roles assigned between patients and providers. These roles can have both a positive and negative impact on the patient experience especially when a patient is labeled or stereotyped into an "unpopular patient" category based on patients' being seen as challenging, non-compliant, and difficult temperaments. As providers are now reviewing their understanding of these labels, impact to patients' perception of care can be impacted.

This view of patients as consumers is seen in legislation through the use of Value Based Purchasing (VBP) and its website (www.medicare.gov/hospitalcompare). The VBP model utilizes quality measures from hospitals that include clinical outcomes (i.e., heart failure, acute myocardial infarction, pneumonia, stroke, blood clot, asthma, pregnancy/deliver, etc.) along with readmission rates, medical complications per patient, mortality rates, and patient satisfaction scores from the HCAHPS© survey. The goal is to disclose performance information so patients are able to "shop" for a hospital. Through this process, patients can evaluate hospitals' performance and choose a hospital the patient feels is the best for their needs (Centers for Medicare and Medicaid Services, 2014).

An early study using the VBP model with the intent to determine correlation with hospital characteristics was conducted by Borah et al. (2012). They used the full VBP data (not just patient experience) as the dependent variable and equated the data to features that are displayed in Table 3.

Table 3 - List of hospital characteristics and sub-characteristics

Hospital characteristics	Sub-characteristics
• Case mix index	
• Disproportionate share percent	
• Percent of Medicare to total inpatient days	
• Percent of Medicaid to total inpatient days	
• Percent of nurse staffing level	
• Teaching percent	
• Total number of measures reported	
• Profit status	
• Government owned	
• Bed categories (7)	• Beds 6-49 • Beds 50-99 • Beds 100-199 • Beds 200-299 • Beds 300-399 • Beds 400-499 • Beds 500+
• U.S. geographic region (8)	• New England • Mid Atlantic • South Atlantic • East North Central • East South Central • West North Central • West South Central • Mountain
• Accreditation by The Joint Commission	
• Obstetric care hospital	

- Wound Management Services hospital
- MRI hospital
- Geriatric services hospital
- Primary PCI within 90 minutes of arrival
- Patients given instructions at discharge
- Prophylactic antibiotics given within 1 hour of incision
- Cardiac patients with controlled 6 am serum glucose
- Beta blocker prior to admission preoperatively

Their findings suggested that there were both positive and negative correlations among several variables and the overall VBP score along with no correlation on other variables. When analyzing this study, it is important to understand that both aspects (HCAPHS© and clinical outcomes) of the VBP model were taken into consideration when determining the correlations. Table 4 summarizes several of these relationships. There are correlations, but they do not direct the hospital administration or the care team to understand where the interventions should be focused to improve the scores overall.

Table 4 - Relationship summary of variables

Relationship to VBP score	Variables
Positive	● Not-for-profit ● Higher bed numbers ● Geographic region mixed results ● Clinical measures ● Hospital services mixed results
Negative	● For-profit status ● Disproportionate share index ● Percent of Medicare patients ● Percent of Medicaid patients ● Lower bed numbers ● Geographic region mixed results ● Hospital services mixed results
No relationship	● Case mix index ● Nursing staff index ● Teaching level

The difference in this study and the one in this paper is the focus will be only on the HCAHPS© portion of the VBP. The understanding of influencers of one aspect of the VBP score can allow performance improvement professionals to focus on the unique characteristics identified without the "noise" of other VBP domains.

Another study by Stein, Day, Karia, Hutzler and Boscoe (2014) shows the sometimes obvious correlations cannot be ignored. They looked at 4,605 hospitals and compared patients'

satisfaction scores to the number of clinical complications within those hospitals. Not surprisingly, an inverse relationship was found as hospitals that had a high number of complications had lower patient satisfaction scores. Even though this seems to be an expected finding, it is important to understand that patients have expectations that, overall, they will have a routine experience during their inpatient stay. Regardless of the reason for the complication or if it could have been avoided, this does not impact how a patient will score the hospital.

Perceptions and Expectations of Healthcare Quality

Understanding how patients perceive the care received and the expectations they have for this care is the most difficult aspects of healthcare reform's attempt to move toward a value-based market (Huppert & Smith, 2014, p. 32). McClelland and Vogus (2014) discuss this difficulty and the attempts that have been made to specifically target these industry-wide changes. They emphasize the need for a specialized approach for each patient and a view from all care team members of being cognizant of the patient as an individual at each encounter throughout the inpatient episode. The emphasis from their studies is the genuine compassion that a patient perceives from the caregiver(s) and whether or not it is reflected in the HCAPHS© scores. They approached their study by using a seven point Likert scale to assess the level of compassion the organization believes it shows toward its own employees as opposed to assessing the perceived compassion the patient felt was received. There was a significant positive correlation between organizations' structured and compassion-oriented programs internally with higher HCAPHS© scores. This meant there was a positive relationship between the organization showing compassion for its employees and employees showing compassion for patients.

The access patients have to clinical information is an additional variable for understanding patients' perceptions. The reality that so much information can be found through

the internet and the use of social media for instant communication has replaced the old adage of "the doctor knows best" with the new belief in "Dr. Google" (Molesworth, 2014, p. 11). Even though clinicians find this frustrating, Molesworth does emphasize the need for all care providers to understand the vulnerability and loss of power a patient feels during an inpatient stay. Although access to information can raise expectations and set a higher standard for healthcare, it can create tension during their time in the hospital. As one of the HCAHPS© questions known as the "Friends and Family Test" from the National Health System in the United Kingdom, Molesworth pushes clinicians to continually ask themselves the question "Would you recommend this hospital to a friend or family member?" after each time they have an encounter with a patient. By personalizing the question, the provider may more easily see the expectations a patient might have and change behavior accordingly.

This idea is built upon a study that addresses misunderstandings of patient needs from the clinicians' perspective along with inaccurate assumptions that hospital personnel might have on what the patient wants during their admission (Schindler et al., 2013). A comparison was used between clinical staff and the patients' post-discharge asking the patients what their expectations had been prior to admission and what the clinical staff had assessed (or assumed) as the expectations during the admission. The findings documented many disconnects such as hyper-attentiveness from patients' perspective to blind-spots in what the patients saw as obvious issues that needed attention. In fairness, it is acknowledged that patients in an ICU will have a higher level of acuity and the ability to communicate in a pre-admission environment may be limited, but addressing expectations at some point in the stay is needed. This could be with close family or through non-verbal communication such as an iPad, a whiteboard, or even an explanation by nurses as to what they are doing and the assumptions they are working even if the patient cannot

respond verbally. Even the most serious patients have care expectations that need to be understood as accurately as possible.

Patient Experience (Narrative and Phenomenological)

In addition to measuring patients' experiences with a quantitative survey tool such as the HCAHPS©, there are many studies that address experiences from a narrative or phenomenological perspective. Hearing patient voices was specific to the study at a Swedish university hospital where the patients were interviewed in addition to completing a scoring tool. The researchers found that even with positive scores, the patients were not able to fully express the concerns they had at an individual level with being vulnerable. They acknowledged the care was within their expectations, but there was not any type of protocol that recognized their vulnerability and the fear associated with it (Sorlie, Torjuul, Ross, & Kihlgren, 2006).

One of the strongest drivers of perceived patient satisfaction is the "taken-for-granted character" of the work that is delivered by nurses in an everyday setting based on research by Walker (2002). In this study, the researcher interviewed 17 individuals who had been patients in a Sydney, Australia hospital. Analysis of the interview data yielded two major positive themes; "safety work" and "comfort work". The patients made specific references to the nurses' assurance of a safe environment in regard to physical harm. They noted that the competency of the nurse on knowing how to do the job increased their satisfaction during different procedures along with the comfort provided by the nurse to help mitigate the worry that comes with being in a vulnerable position. This quality was beyond the specific understanding of the nurses' job, but addressed a more basic human necessity as found in Maslow's hierarchy of needs (Liu, Aungsuroch, & Yunibhand, 2016). Both of these aspects were shown to increase patient satisfaction. Adversely, there was a decrease in patient satisfaction when the nature of the

nurses' work was viewed as "routine". The patient felt as though they were part of a system and were being managed through it. This was seen in direct contradiction to the first two positive aspects. If the nurse displayed an attitude of complacency with the tasks, the patient felt as though a mistake could easily be made and safety and compassion were negated.

An intriguing discussion point Walker (2002, p. 46) raises is the idea of patient narratives "not being the objective truth, but the acknowledgement of multiple realities". The patient felt as though there was a decrease in care when it was perceived the nurse was in a routine mode, but that does not necessarily mean that the nurse actually was less competent or giving a different level of care. Additionally, as recorded in patient narratives, the strongest positive or negative experiences are the ones that are recalled and can have an impact on the overall satisfaction if a narrative was the only tool used to understand the patient experience.

The understanding of the patients' current state and how that contributes to how the individual will perceive care continues in a study by Morsem, Bottorff and Hutchinson (1994). The researchers interviewed patients who had been in painful or clinically traumatic events and required hospitalization. The question of "Are you comfortable?" took on multiple meanings based on the patients' specific diagnosis. Through the reflective narrative process, the researchers found nine themes or states patients used to describe their body discomfort and how to find comfort in their situations. These themes/states along with descriptions and where "comfort is drawn from" are in Table 5.

Table 5 - Themes/states of discomfort, description, and how to achieve comfort

Theme/state of discomfort	Description of discomfort	How to achieve comfort
Dis-eased body	Focuses on the symptoms of the illness; having disruption become part of the normal day-to-day activities	Knowledge, education of the illness; understanding of what to expect and how to address it
Disobedient body	Relationship with the body has changed; the body feels independent of the mind	Acceptance of the change; finding alternatives to compensate for the loss of control; minimize impact on daily life; regain independence
Vulnerable body	Anticipation of potential pain or clinical procedures; hyper-sensitive to signs of changes due to illness	Needs security, safety, and trustworthiness from caregiver
Violated body	Objectified, embarrassed, on display, feeling of personal boundaries not being observed	Temporarily detaching and distancing themselves during the treatment; ability to connect at a personal level with a caregiver
Enduring body	Chronic, continuous pain; no relief and must address the pain as part of everyday life	Need to re-focus attention from pain through meditation or through connection with another human; a nurse's voice or touch are noted as being able to give momentary relief
Resigned body	Body has changed permanently; no connection with the former self; does not feel as though it is the patient's body	Defining new limits; understanding how the new body works in the world

Deceiving body	Body silently and subtlety becomes sick; the patient is surprised to find out that s/he has a specific diagnosis	Needs reassurance; defining next steps and appropriate care
Betraying body	Giving appearance of dealing with daily life, but stress reflected back into body causing clinical issues	Not just through clinical relief, but also through behavioral health counseling; understanding how to address the stress of daily life
Betraying mind	Forgetfulness, memory-loss, dementia	Support of others; trust someone directly to define reality; patience on addressing the difficulty and embarrassment of not understanding or remembering life as was once understood

The researchers conclude with noting the "tenuous nature of comfort" (1994, p. 194). There is no easy solution for patients whose condition matches these different themes, but the ability to understand the nature of the comfort needed is essential to assisting the patient at that moment and ensuring the patient is satisfied with the care received.

As seen in this section, the qualitative aspects of patient experience have a rich, more detailed component than just the HCAHPS© score, but are also more difficult to define and to put into practical clinical protocols. Tsianakas et al. (2012) emphasizes this idea in their research around breast cancer patients. The survey data were useful at a high level to view the overarching issues, but to be able to address patient-level concerns requires patient-level stories. Table 6 utilizes the argument that the researchers make (both pros and cons) for each approach. The strengths and the weaknesses are shown with a conclusion that a joint approach is the closest for the complete patient story (2012, p. 10).

Table 6 - Strengths and weaknesses of each method for local quality improvement

	Strengths	Weaknesses
Qualitative	• Covers whole patient pathway or journey • Good for providing specific detail for local quality improvement purposes • Engages clinicians and other staff • Can be highly specific for a service • Good on relational/emotional aspects of experiences • Inductive; quality issues are determined by patients during the interviews and at patient events	• Not always representative • Generally thought to be relatively time-consuming and expensive when compared to surveys • Requires specific qualitative research skills to ensure a valid and reliable analysis • Difficult to use for performance monitoring purposes over time or across institutions • Requires sufficient participants for involvement in co-design group process
Quantitative	• Representative • Can engage clinicians and other staff if feedback is prompt and at service level • Good for identifying issues with functional aspects of experience • May identify specific actions needed in some areas and other issues requiring further investigation • Good for comparing between groups, institutions and for performance monitoring over time • Open patient comments, if collected and analyzed, may provide additional understanding of issues identified	• May need to focus on specific service or parts of the patient journey to avoid burdening patients with a long questionnaire • Findings may need further investigation to identify actions for local quality improvement purposes • Deductive: quality issues are pre-determined by researchers/staff/patients • Requires technical expertise around survey design, administration and analysis to ensure valid and reliable • Relies on large enough sample size • Social desirability may influence telephone survey responses if not perceived as anonymous

As studies have focused on the patients' perceived experiences, Tabiano, Chaboyer and McMurray (2013) focus on family members' perceptions. Based on individuals, the acuity of diagnosis, and family dynamics, it is very possible that a family member may be completing the HCAHPS© survey on behalf of the patient. Because of this, it is important family members share in the perception of care for a patient. These three researchers focused on the family members' understanding of the care and status of the patient during the nurse "handover" (giving an update on the patient between shift changes) and proactively involving the patient's family as allowed by the patient. A single case study was utilized with "mini-cases". The study focused on eight patients and their families at a suburban hospital in Queensland, Australia. For this study, all volunteers were female patients, which could create a bias in how findings were interpreted. Three unique themes with subthemes that impact a family members' perception of care 01are documented in Table 7.

Table 7 - Family members' perspective of bedside handover

Theme	Sub-theme
Understanding the situation	Feeling informed Understanding patient's condition Understanding patient's treatment
Interacting with nursing staff	Sharing information Clarifying information Assisting with care Asking questions Interpreting for the patient
Finding value	Feeling at ease Feeling included Valuing individualization Preparing for the future Maintaining patient privacy

Designation of Hospitals by Independent Variables

This study reviews hospital attributes that could influence patients' experiences and satisfaction, there are multiple independent variables that will be included. Hospitals in the U.S. in the 21st century are quite varied in nature and are difficult to identify with one unique characteristic, which correlates to most hospitals having multiple identities. Therefore, the characteristics that will be addressed do not represent an exhaustive list, but represent identifying characteristics of hospitals in the U.S. that are believed to have influence on patients' experiences. Based on time, available databases, and current drivers of healthcare organizations, the variables chosen are seen to represent characteristics that have the potential to influence patients' experiences. This portion of the paper will review literature on each of these variables, the background, or history that is associated with it and, as research exists, the relationship of each variable to the patients' experiences. The alphabetic list below identifies the variables and how its characteristic is classified. The classification of "application" or "non-application" refers to the process the hospital achieved the characteristic. For example, "application" variables (e.g.,

Baldrige award, MAGNET™, and Most Wired™) require the organization to complete a formal application and be chosen for the distinction based on unique criteria. All other variables (e.g., Academic, Faith based, For profit, Healthcare system, Safety Net, and Sole Provider) had no application process and received the designation based on mission, charter, organizational structure, or population served.

- Academic – type of hospital/non-application
- Baldrige award – 3rd party designation/application required
- Faith based – type of hospital/non-application
- For profit – type of hospital/non-application
- Healthcare system – type of hospital/non-application
- MAGNET™ – 3rd party designation/application required
- Most Wired™ – 3rd party designation/application required
- Safety Net – 3rd party designation /calculation/non-application
- Sole Provider – 3rd party designation/non-application

Academic

Academic Medical Centers (AMCs) are healthcare facilities that have a direct connection to a medical school or university, have a "tripartite mission: patient care, education, and research" (Murray & Bursch, 2014, p. 1) and have unique challenges in attaining patient satisfaction goals. Press (2008, p. 275) lists seven unique issues that have been ascribed to patients' perceiving a lower standard of care than in other facilities (although, several of these items are not exclusive to an AMC).

- Organizational size and complexity
- Plant size and complexity
- Academia creates a mentality of independence and "expertise"
- In addition to a healing mission, there is a research and teaching mentality
- A heroic, cutting-edge mentality
- Although medical, nursing, and other students learn through the hands-on experience, this means inexperienced staff may treat and interact with patients
- The temporary nature of many staff (students, residents, trainees, visiting fellow, and professors) make acculturation and pan-institutional values and behaviors difficult to sustain.

All hospitals regardless of their characteristics face obstacles and barriers to provided excellent care at all times. Whether these are true challenges that AMCs face, Press argues that patient satisfaction still must be addressed. The goal must be to understand how to do that within the parameters of the organization. This can start with understanding the unique advantages of an AMC.

First, an AMC can utilize its hierarchical structure to exercise more "clout" to oversee conformity to practices. Because most physicians within an AMC are employed by the organization as opposed to being independent providers with admitting privileges, there is an inherent connection to the organization that the individual acknowledges and should be seen as an internal loyalty or a mandate to follow prescribed protocols (Press, 2008).

Second, as there is usually greater diversity within departmental specialties, there has been success in healthy competition to tie research money to patient satisfaction scores. Because of the constant battle for these dollars, the incentive to drive research to practical outcomes has immense benefits (Press, 2008).

Third, AMCs should take advantage of their research missions. They have proven themselves experts in clinical trials. Press questions why these same research techniques cannot be applied to patient satisfaction and performance improvement initiatives. This is a "play to your strength" strategy that should not be overlooked (Press, 2008).

Baldrige Award

The Malcolm Baldrige National Quality Award has been in existence since its enactment by the U.S. Congress in 1987 with its first award given in 1988. The award is overseen and managed by The National Institute of Standards and Technology (NIST), a division of the United

States Department of Commerce. The initial drivers of the award included a three-part aim by the NIST on its website (The National Institute of Standards and Technology, 2015, n.p.).

- Identify and recognize role-model businesses
- Establish criteria for evaluating improvement areas
- Disseminate and share best practices

Initially, the award was focused on the manufacturing industry, but in 2002 expanded its scope and created specific criteria for healthcare organizations. The first healthcare recipient was the Franciscan Sisters of Mary Healthcare System (SSM), St. Louis, MO (The National Institute of Standards and Technology, 2015, n.p.). With inclusion of healthcare organizations as potential awardees, there has been an increased interest in determining the correlations between an organization that has achieved this honor and quantifiable outcomes that are common within this industry (Goonan, 2007, p. 41),

This idea is expounded upon by Griffith (2015) in a study addressing the correlation of the expectations of "High Reliability Organizations" (HRO) to the outcomes of Baldrige awardees within healthcare. The original research began with Chassin and Loeb (2013) who use the idea of HRO as appropriate to healthcare facilities and describe the work of these organizations as "collective mindfulness" toward excellence. The researchers utilize a 14 point model that addresses performance functionality. The criteria from the Chassin-Loeb Component and Approach Standard Model are in Table 8 and emphasizes leadership, a culture of safety and reliability, and robust process improvement.

Table 8 - Chassin-Loeb Component and Approach Standard Model

Component	Approach Standard
Leadership	
Board	Board commits to the goal of high reliability
CEO/Management	CEO leads the development and implementation of a proactive quality agenda
Physicians	Physicians routinely lead clinical quality improvement activities and accept the leadership of other appropriate clinicians; physicians' participation in these activities is uniform throughout the organization
Quality Strategy	Quality is the organization's highest priority strategic goal
Quality Measures	Key quality measures are routinely displayed internally and reported publicly; reward systems for staff prominently reflect the accomplishment of quality goals
Information Technology	Safely adopted IT solutions are integral to sustaining improved quality
Safety Culture and High Reliability	
Trust	High levels of (measured) trust exist in all clinical areas; self-policing of behaviors is in place
Accountability	All staff recognize and act on personal accountability for maintaining a culture of safety; equitable and transparent disciplinary procedures are fully adopted across the organization
Identifying Unsafe Conditions	Close calls and unsafe conditions are routinely reported leading to early problem resolution before patients are harmed; results are routinely communicated
Strengthening Systems	System defenses are proactively assessed and weaknesses are proactively repaired
Assessments	Safety culture measures are part of the strategic metrics reported to the board; systematic improvement initiatives are under way to achieve a fully functioning safety culture
RPI (Robust Process Improvement)	
Methods	Adoption of RPI tools is accepted fully throughout the organization

Training	Training in RPI is mandatory for all staff, as appropriate to their jobs
Spread	RPI tools are used throughout the organization for all improvement work; patients are engaged in redesigning care processes, RPI proficiency is required for career advancement

Based on this table's standards for "high reliability", the researchers compared these components to the most current recipient of the Baldrige Award, North Mississippi Health Systems (NMHS), Tupelo, MS. They utilized the specific wording from NMHS's application and found that 11 of the 14 Chassin-Loeb criteria are in alignment with the Baldrige standards. They then pulled quality measures (clinical and non-clinical) from *WhyNotTheBest.org* website maintained by The Commonwealth Fund for a full comparison of all past Baldrige recipients. Table 9 includes the recipient, regional base, and the year awarded (Griffith, 2013, p. 50). The recipients listed represent the 16 hospitals that received the award prior to the HCAHPS© data utilized for this study.

Table 9 - Baldrige healthcare awardees with regional base and year awarded

Baldrige awardee	Regional base	Year awarded
SSM Healthcare	St. Louis, MO	2002
St. Luke's Hospital of Kansas City	Kansas City, MO	2003
Baptist Hospital, Inc.	Pensacola, FL	2003
Robert Wood Johnson University Hospital	Hamilton, NJ	2004
Bronson Methodist Hospital	Kalamazoo, MI	2005
North Mississippi Medical Center	Tupelo, MS	2006
Sharp Healthcare	San Diego, CA	2007
Mercy Health System	Janesville, WI	2007
Poudre Valley Health System	Fort Collins, CO	2008
Heartland Health	St. Joseph, MO	2009
Atlanticare	Egg Harbor Township, NJ	2009
Advocate Good Samaritan Hospital	Downers Grove, IL	2010
South Central Foundation	Anchorage, AK	2011
Schneck Medical Center	Jackson County, IN	2011
Henry Ford Health System	Detroit, MI	2011
North Mississippi Health Systems	Tupelo, MS	2012

Their analysis showed through the use of "high reliability" standards, there was a connection to patient satisfaction scores. Specifically, HCAHPS© survey scores of two domains (patients highly satisfied and patients willing to recommend the hospital to friend and family) had average values of 0.745 and 0.752, respectively, compared to a national average of 0.697 and

0.708, which showed a statistically significant difference in perceived care. This was not true for all other areas (specifically clinical outcomes) where receipt of the award has not shown to impact readmission rates, mortality, and costs (Griffith, 2013, p. 56).

A second study focusing on Baldrige recipients is their use of "Knowledge Management" (KM). This term has become increasingly common in the field of performance improvement, but has not been consistently applied in healthcare organizations. It describes the data and information associated with a specific work effort, and how those items are utilized for the benefit of the organization's performance. This includes multiple aspects such as reporting structures, processes, and strategic coordination (Griffith et al., 2013, p. 188). It has been categorized into four elements of knowledge with the characteristics. (Alavi & Leidner, 2001).

- Knowledge creation – formal research, literature review, or field observation that leads to discrete statements of findings
- Knowledge application – use of specific knowledge in an economically valued or production activity
- Knowledge storage and retrieval – recording specific knowledge in a manner that captures its unique characteristics and supports its recovery
- Knowledge transfer – communication of knowledge by voice, sign, or messaging system and by explicit training

Through a qualitative analysis of the first nine Baldrige awardees' applications, the researchers coded data corresponding to the four categories from Alavi and Leidner. This allowed the researchers to view the applications in perspective to KM. The results indicated a strong tie to Baldrige awardees and KM components. In summary, there were 1,225 references to KM that could be associated with a specific component which translated to a 57% of KM references per application (Griffith et al., 2013).

The researchers concluded that based on the prevalence of KM activities in the applications and the alignment to a KM component that KM is an attribute of Baldrige recipients. This serves as an interesting discussion point for analyzing high-performing organizations since

KM is very specific in its scope and does not relate an organization's ability to be high-performing to unique quality metrics.

Lastly, the Baldrige award has been shown to focus organizations' activities on quality initiatives, but multiple studies' findings are inconsistent on how or whether the outcomes have improved healthcare functions (Griffith, 2009, Schulingkamp & Latham, 2015, Traymor, 2016).

Faith Based

Although hospitals have a strong foundation in faith-based organizations (Englehardt, 2000, p. 295), little research has been reported on quality outcomes or patient satisfaction (Garrido, Allison, Bergeron & Dowd, 2012, p. 683). One exception to this was a study of infant mortality rates based on the religious or non-religious affiliation of a hospital with results showing non-statistical differences based on hospital characteristic (2012, p. 688).

The majority of studies found distantly related to this subject are on women's health options for reproductive health or, less frequently, end of life protocols within a faith-based healthcare organization that address the issues that may arise between a patient's plan of care and the healthcare policies based in doctrinal beliefs (Cugliari, & Miller, 1994, Guihi, Sheeder & Teal, 2014, Rubin, Grumet, & Prine, 2008).

For-Profit

Since the beginning of the 21st century there has been a significant increase in hospitals that are now classified as for-profit. This move to a corporate model accounting and governance structure has been controversial, but advocates argue that bringing much-needed resources in forms of capital dollars and experienced executives with business rigor can be put in place to improve outcomes. Conversely, critics believe that a for-profit status will inadvertently move a

hospital's mission to a full emphasis on earnings over caring for those in need (Joynt, Orav, & Jha, 2014, p. 1645).

As this debate continues, there is little empirical evidence to show there have been measured differences in outcomes. The study reported by Joynt, Orav and Jha (2014) attempts to address this lack of evidence from a unique perspective. Instead of comparing the clinical, financial, and demographic differences between for-profit and not-for-profit hospitals, they intentionally use data from not-for-profit hospitals that converted to for-profit hospitals as their variable while the control group of not-for-profit did not change. The results showed a definite increase in financial margins in favor of for-profit (2.2% vs. 0.4% improvement), increase in quality metrics for for-profit (6.0% vs. 5.6% improvement), no change in mortality rate or Medicare volume but disproportionate change in Medicaid volume for for-profit (-0.2% vs. 0.4%) along with significant changes in number of patients who were Black or Hispanic. Likewise, in a study that analyzed Medicare readmissions in a 30 day period for patients who had been discharged, a readmit was more likely if the discharging hospital was for-profit. Mortality was unchanged, but the overall cost of patient care was higher due to the readmits (Kind, Bartels, Mell, Mullahy & Smith, 2010).

The specific concern over payments for charity care and its disproportionate distribution was documented in a study of California hospitals where not-for-profits spent 1.9% of their operating budget on charity care compared to 1.4% with for-profits. It is important to understand that tax burden is greatly reduced for for-profit hospitals based on their charity care volume (Valdovinos, Le, & Hsia 2015).

Last, Dreys, Tscheulin, and Lindenmeir (2014) reported on hospital care perceptions based on for-profit or not-for-profit characteristics from patients in German hospitals. Their

study of hospital characteristics produced specific categories that patients associated with each type of hospital . "Warmth" was associated with not-for-profits while "competent" was associated with for-profits. The perceptions of hospital care is different when outside of the U.S. and care should be taken when assessing themes across countries and cultures.

Health System

Studies are difficult to find on patient perceptions of healthcare systems in the U.S. While there are many studies that focus on clinical trials within a system, the associated literature search does not identify studies measuring the satisfaction level (Coppler, Rittenberger, Wallace, Callaway & Elmer, 2016, Hanney, Soper, Jones & Boaz, 2016, Zerbo, Massolo, Qian, & Croen, 2015).

MAGNET™

MAGNET™ designation has been a representation of nursing excellence for hospitals since the 1990s. Roberts (2007, p. 6) describes the MAGNET™ designation as representing the "excellence in nursing practice" based on the goals of the American Nurses Credentialing Center (ANCC). These goals (ANCC, 2014) are

- Promote the quality in a milieu that supports professional practice
- Identify excellence in the delivery of nursing services
- Provide a mechanism for the dissemination of "best practices" in nursing services.

As a voluntary step-by-step recognition program to which a hospital applies, there have been mixed findings on studies of nurses' job satisfaction comparing hospitals with MAGNET™ and those without. (Crotty, 2010, p. 12, Hickson, 2014, p. 299, Laschinger, Shamian, & Thompson, 2001, p. 209). With regard to relationships to patients' satisfaction scores, Smith (2014, p. 31) reported significant differences on higher scores in six of the seven domain scores within the survey, which should be an indicator of a postive correlation for this study. Any

hospital in the "MAGNET™ process" would not be considered a MAGNET™ hospital regardless of their status in working toward this designation.

Chen, Koren, Munroe and Yao (2014) reported a positive correlation of Illinois hospital HCAPHS© data to MAGNET™ status utilizing 2009 data. The specific nursing questions that are asked in the HCAHPS© survey scored higher and implied MAGNET™ recognition can impact the view patients have of the overall care they received and whether or not they would recommend the hospital. The results raised questions due to the findings that African American patients reported significantly lower satisfaction scores and that if this population had been segmented from the whole, there would no/little correlation to the overall scores due to MAGNET™ status.

Most Wired™

The newest category that can be used to describe a hospital is "Most Wired™". This term has been used since 2005 and awarded by *Hospital and Health Networks*, the flagship publication of the American Hospital Association. The publication sponsors the voluntary "Most Wired™" Survey annually with the goal to measure the adoption of information technology within healthcare organizations (Healthcare's Most Wired™, 2014). Based on the increasing focus of electronic health record (EHR) systems as a means to address efficiency and patient outcomes, healthcare organizations are now being incentivized and in the future, penalized for their use or lack of EHRs (EHR Incentive Programs, 2014).

Whitten, Mylod, Gavran and Sypher (2008) researched patient satisfaction reports comparing hospitals that were designated as Most Wired™ compared to those that were not. They tested three separate hypotheses.

1. Patients from the Most Wired™ hospitals would report higher satisfaction scores regarding the overall experience in the hospital.

2. Patients from the Most Wired™ hospitals would report higher satisfaction including:
    a. Admission process and experience
    b. Experiences with hospital-based nurses
    c. Items related to tests and treatments within the hospital
    d. Experience with physicians during their hospitalization
    e. Discharge experience
    f. Personal issues such as sensitivity and pain control

3. Status as a Most Wired™ hospital would more accurately predict higher patient satisfaction than specific demographic characteristics of the hospital such as number of patient beds, case mix, number of critical days, payer mix, community size, total number of full-time equivalents and services provided

This study utilizes the Press Ganey patient satisfaction survey, which is very close to the domains utilized in the HCAPHS© tool. Also, this study predated the implementation of Patient Protection and Affordable Care Act so there were no financial incentives associated directly with patient satisfaction. Indirect relationships were found in terms of patient loyalty and recommendations. The data were collected between January 1, 2004 and September 5, 2005, which coincided with the first publication of the Most Wired™ list. Total number of hospitals surveyed were 1,382, all were in the United States. The patient satisfaction scores from the Press Ganey survey were then compared to the results of the 100 Most Wired™ hospitals for 2005. The findings are in Table 10 and indicate five of the eight hypothesis are considered "supported". The items "not supported" are "Their experience with hospital-based nurses", "Items related to tests and treatments within the hospital", and "Their discharge experience".

Table 10 - Comparison of Press Ganey patient satisfaction scores to Most Wired™ hospital list

Hypothesis	Result
1. Satisfaction scores regarding the overall experience in the hospital.	Supported
2a. Their admission process and experience	Supported
2b. Their experiences with hospital-based nurses	Not supported
2c. Items related to tests and treatments within the hospital	Not supported
2d. Their experience with physicians during their hospitalization	Supported
2e. Their discharge experience	Not supported
2f. Personal issues such as sensitivity and pain control	Supported
3. Status as a Most Wired™ hospital would more accurately predict higher patient satisfaction than specific demographic characteristics of the hospital	Supported

This study is important to this paper as EHR (electronic health record) issues have changed in the healthcare industry from the 2004–2005 data collection. When these data were collected, hospitals were new at implementing a full EHR system and the perceptions of patients were unknown.

As healthcare reform has become a reality with the majority of hospitals utilizing technology in more meaningful ways with an emphasis on patient satisfaction due to business objectives, it will be important to revisit this comparison within this study to understand how this issue has evolved in the last decade.

Safety Net

From the search results of Safety Net hospitals, it was reported they have had a difficult time with ensuring high patient satisfaction scores. One of the issues is there is a specific domain question that addresses the cleanliness of the facility (Clark, 2012, p. 1). Because Safety

Net hospitals tend to be older and not have had the new makeovers, they will be perceived as "not as good" as hospitals that have more funds available.

In a specific study of how Safety Net hospitals rank with others, Chatterjee, Joynt, Orav and Jha (2012, p. 1201) review hospitals categorized as Safety Net through identifying the highest quartile of hospitals that payments are made under the federal Disproportionate Share Hospital (DSH) program. The researchers compared these designated hospitals to a database of 3,000+ hospital. The comparisons showed that in nearly every category of the HCAPHS© domains, the non-Safety Net hospitals performed significantly better and continued to trend better over time (p. 1210). For the domain question that asks if a patient would recommend this hospital, the graph in Figure 3 portrays the data visually and underlines the issue that Safety Net hospitals must face for likelihood to recommend.

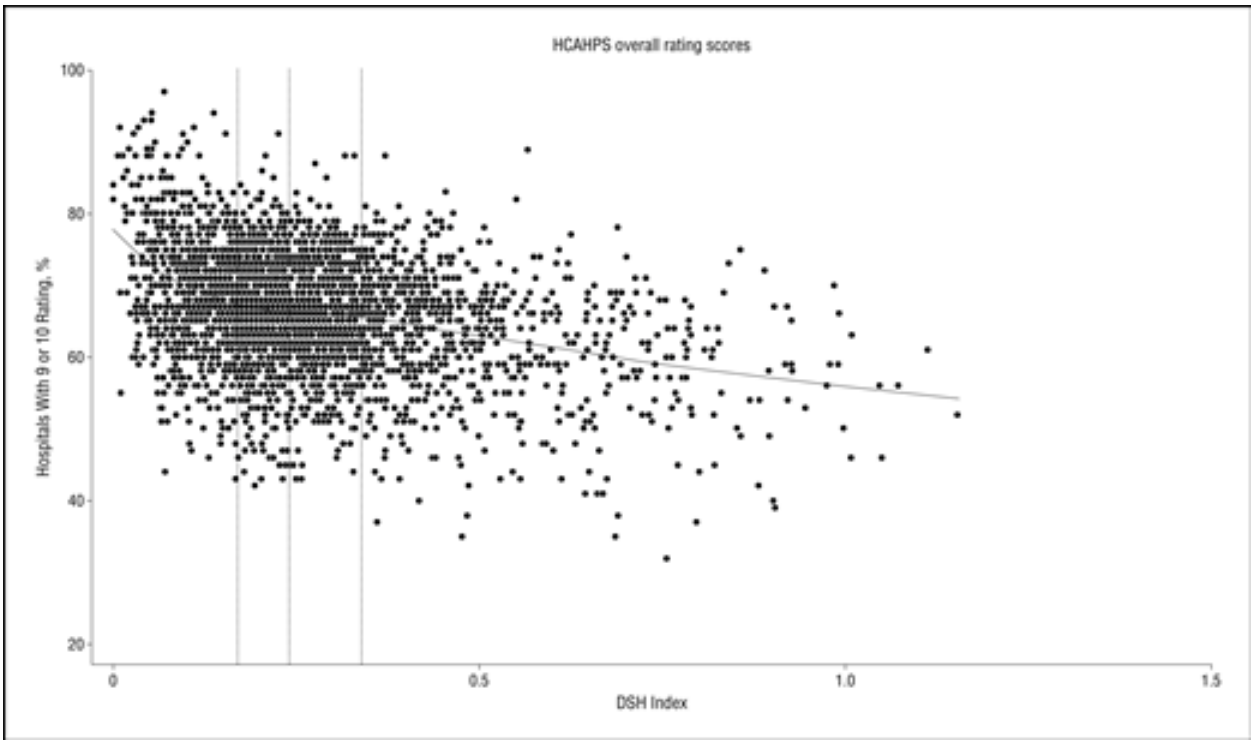

Figure 3 - Overall Hospital Ratings by DSH Quartile.

Figure 3 should be interpreted as the highest quartile (far right) is where the Safety Net hospitals are rated. Non Safety Net hospitals are much more likely to be recommended by their patients. The reasons are varied, but strong evidence suggests that due to lower income demographics, Safety Nets accept larger portion of charity/uncompensated care, that their facilities and services are not perceived at the same level as other hospitals (p. 1210). Additionally, there continues to be a stigma that Safety Net hospitals are "not as good" as other hospitals even though there are strong examples to the contrary with such institutions as Denver Health in Denver, Colorado which is a showcase for high quality and patient satisfaction outcomes (Gabow, Eisert & Wright, 2003, p. 143).

Sole Provider

A surprising aspect in the investigation of literature on the different characteristics of hospitals was the lack of information on the Sole Provider status. Referred to as "Sole Provider", "Sole Provider Hospital", or "Sole Community Hospital", the designation is an important aspect of healthcare delivery. From the Definition section of this study, Sole Provider is a CMS designation based on different criteria of geographic isolation that allows enhanced reimbursement. From a comparative perspective, this appears to be important in that a Sole Provider hospital (by location) would limit the choice patients would have in determining where service/care was received.

Mei, Carretta, and Hurley (2003, p. 91) recognize the care within a Sole Provider hospital as they view the specific issue of HPDP (Health Promotion and Disease Prevention), but are more concerned on the ownership of the hospital as opposed to the specific fact that the hospital is a Sole Provider.

Domains within the HCAHPS© Survey Tool

The evolution of the HCAHPS© domain questions will be addressed in Chapter 3, but from a literature perspective, there is evidence that provides background on the survey items. Tefera, Lehrman, and Conway (2016) support the specific domains and advocate that the survey tool provides valuable information to healthcare organizations if viewed as an overall expression of the institution rather than attempting to pinpoint individualized care opportunities. Even though they acknowledge disagreement within the healthcare industry on the value of all questions, they maintain that it creates "standardized, publicly reported metrics that allow fair comparison of patient experience in hospitals across the nation" (2016, p. 2167). The eleven areas (or sometimes referred to as the "measures") represent eight domains of the tool. It should be noted that this terminology could be confusing due to the interchangeability of *domains* and *measures* within the literature.

Nurse Communication

It is common for nurses to have the closest or most intimate relationship with the patient during the hospital stay. Nurses are in the patients' rooms most often, discuss specific issues ranging from clinical to social, develop a relationship with family members, and seen as most readily available for patient needs (Stimpfel, Sloane, McHugh, & Aiken, 2016). Because of this, much of what patients associate with their time in the hospital will be directly tied to nurses. This can be a positive or a negative for the HCAHPS© score. Many patients will focus on one incident (good or bad) and will use that instance to represent their full experience. Hospitals have become keenly aware of this and view nurses as a key to their HCAHPS© scores. It is debatable as to the fairness of this approach, but is common practice in many hospitals (Kutney-Lee et al., 2009).

Physician Communication

Concern has been noted by healthcare professionals that a providers' clinical expertise does not equate to strong interpersonal skills and communication with patients. This led to a study in 2015 that addressed this issue by creating communication training focusing on specific patient-centered concepts and how working with the patient and family members can be perceived differently based on physicians' style and method. The physicians were observed on communication with patients who had consented to be included in the study. After the initial observation, follow-up questions were presented to the patients for feedback. The intent of the providers' message was compared to the message heard by the patients with multiple instances of different understandings documented. Where misunderstandings occurred, the providers were informed and coached on how the information was received and how it could have been delivered differently. Didactic classes were provided to address the most common errors of broken communication between providers and patients. After 3 months, the study reconvened for a post-intervention session and noted an increase in provider communication HCAHPS© domain scores for the control group (Boissy et al., 2016).

Presuming patients understand the information that is delivered by a provider is common. This led to emphasizing delivery styles such as sitting down to discuss the information, ensuring that all members of the family who were in the room at the patients' consent were introduced, and utilization of direct eye contact with the patients to increase the patients' perception of understanding the information from the provider (2016).

Staff Responsiveness

Literature does not address the domain of Staff Responsiveness as a separate domain. This appears to be tied to other domains of communication with clinical staff. A gap to be

addressed is the full understanding of the patients' needs while in the hospital and how all staff respond to patients' needs. This could range from a nursing assistant to an administrator or business support personnel.

Pain Management

The most controversial HCAHPS© domain has been viewed as Pain Management. Tefera, Lehrman, and Conway (2016) specifically address this issue through a review of industry professionals' discussion that Pain Management can only be addressed through opioid prescriptions. The idea that the patient believes that pain is best controlled through dangerously addictive substances (Dickson & Blesch, 2016) could be counterproductive to the patients' current needs and exacerbate the opioid addiction epidemic currently facing the country (Fisher, 2016). The authors point out that there "is no empirical evidence that failing to prescribe opioids lowers a hospital's HCAHPS© scores" (2016, p. 2167).

Communication about Medications

Medication Education has been shown to be one of the primary actions that lead to readmission avoidance (Barlett-Ellis, Bakoyannis, Hasse, Boyer, & Carpenter, 2016). By educating the patient at the point of discharge on the medications prescribed through an understanding of what the medication looks like, how often it is taken, the dosage, and the goal of the medication, the patient becomes a more active participant in their recovery. Increases in the HCAPHS© scores for this measure have occurred since 2014 and is correlated to reduced readmissions in specific hospitals. Educating the patient on their medications has also included the presence of a pharmacist at the bedside. Historically, hospital pharmacists have very little or no direct communication with patients. The role of spokespersons for the clinical aspects of care was relegated to the physician or nurse. In the last several years, this has changed as pharmacists

are now becoming viewed as part of the clinical care team who can provide specific information relevant to their expertise. Examples that have been given where a pharmacist is better equipped for the discussion with the patient is on generic versus brand name medications, recognition of medications that look alike/sound alike, and provide a safety check for adverse medication interactions (Thompson, 2014).

Discharge Information / Care Transitions

From the same literature reviewed in the Nursing Communication, the Discharge Information/Care Transitions domain is connected directly to the experience that patients had with nurses. Because nurses are the most likely persons who will deliver instructions for care at home and follow-up, Kutney-Lee et al. (2009) discuss that patients associate this domain with the ability to communicate with and trust nurses.

Cleanliness and Quietness of the Hospital Environment

Literature for this domain is divided between the concepts of Cleanliness and Quietness. For cleanliness, McCaughey, Stalley, and Williams (2013) discuss the importance of an environmental service (EVS) team within a hospital being a critical aspect to HCAHPS© scores. The work that is done through EVS is removed from clinical expertise, but is an excellent example of how the HCAHPS© scores impact all aspects of the organization. It is common that this department would be overlooked, but there is a direct tie to patient experience through patient interaction while the EVS employee is in the room cleaning, and the work that is done in the room preparation. The researchers found there was positive correlation between spending on EVS training programs and HCAHPS© quietness score.

Similarly, the concept of quietness was addressed by Inman (2015). The goal was to train employees on a telemetry unit on how a quiet and peaceful environment can positively

impact patients' perceptions of care. Through a focused attempt to limit hallway conversations, note specific quiet zones, and ensure breakrooms utilized closed doors with no access to the public increased the perceptions of a more professional environment that both patients and family members associated with a better level of care. This work on quietness had been utilized earlier by Murphy, Bernardo, and Dalton (2013) in an initiative that has been called the "Nightingale Principle" that addressed the quietness of the patients' units at night with a focus on increased perceptions of professionalism and healing.

Overall Rating of the Hospital / Willingness to Recommend Hospital

The last domain of the HCAHPS© asks two specific questions that have been argued to be the most important of all the survey questions. While all survey domains are weighted equally for the overall score, some industry professionals have a strong belief that the true measure of a hospital is this domain. Cliff (2012) addresses this in an argument for a patient-centered approach to patient satisfaction. By ensuring that patients' needs are met overall, the organization can focus on all areas. This is in contrast to the original intent of the HCAHPS© where the goal was to inform each area and allow it to focus its energies appropriately.

Additionally, this domain has raised interesting discussion by asking if the question of patients' recommendations for the hospital would be different if asked from the perspective of whether or not they would recommend it to friends and family. Tefera, Lehrman, and Conway (2016) confirm consumers can have higher standards for those closest in their lives than for themselves.

Summary

Understanding the drivers of patients' experiences and satisfaction is complex. Multiple approaches have been taken to understand the specific components of patient care that influence

people when asked to score the hospital along with reviewing the specific characteristics that define a hospital's culture. The hospital traits indicate the diversity of the organizations that provide care while the survey questions address the myriad of possibilities how care can be evaluated. From this literature review, this complexity of this issue shows varied correlations, but cannot identify a main predictor of how patients view their care.

CHAPTER 3 - METHODS

The analysis of the correlations between the dependent variables (patient satisfaction scores from each domain of the HCAHPS© survey) to the independent variables (hospital characteristics) will be the focus of the methodology section. After a review of the research questions and background on the HCAHPS© survey, this chapter details the specific design and analysis within the study.

Drivers of this Research

The data for this study was obtained from the United States' Department of Health and Human Services through their Centers for Medicaid and Medicare Services. The data are collected from the HCAHPS© survey (Appendix A) and was downloaded with a start date of 7/1/2013 and end date of 6/30/2014. The time period chosen correlated to data availability at the study's initial analysis.

The importance of this data is that as part of the PPACA, the data are needed to provide comparisons for hospitals as part of the VBP mandate. As stated in Chapter 1, hospital reimbursements are tied to patient satisfaction scores as part of the PPACA. This data provides one of the major inputs into the calculation of the payments to the hospitals through CMS.

Research Questions

The overarching research question is "what are the predictors of patient satisfaction scores based on hospital characteristics?". This becomes quite complex as there are 11 domains in the HCAHPS© survey along with the combination that differentiates these areas in Table 11.

Table 11 - Restatement of research questions

Single Predictor for Score by Domain	Combination of Predictors for Score by Domain
What is the primary hospital characteristic that predicts patient satisfaction scores for…	What is the combination of hospital characteristics that predict patient satisfaction scores for…
• Nursing communication? • Doctor communication? • Responsiveness of hospital staff? • Pain control? • Facility cleanliness? • Facility quietness? • Medication education? • Discharge instructions? • Care transitions? • Overall hospital rating? • Willingness to recommend hospital?	• Nursing communication? • Doctor communication? • Responsiveness of hospital staff? • Pain control? • Facility cleanliness? • Facility quietness? • Medication education? • Discharge instructions? • Care transitions? • Overall hospital rating? • Willingness to recommend hospital?

The complexity of the data could be seen through a spreadsheet that shows each combination of characteristics to each domain. The practicality of including a spreadsheet of this size within this study would not be realistic, but was used through the analysis portion of this paper using SPSS. To understand the magnitude of the comparison, the number of domains (11) would be multiplied by every combination of the characteristics (9) for all hospitals (3,109). Additionally, this includes all combinations of the characteristics ranging from 1 characteristic to all 9 characteristics.

Because of the possibility of patterns or higher predictability found through analysis of different combinations of the independent variables, 16 different combinations have been identified and will be run for each domain using the same design. These combinations are below.

- All variables
- Variables that are determined through a hospital application process (includes Baldrige, MAGNET™, Most Wired™)

- Variables that determined through non-application processes (includes Academic, Faith Based, For Profit, Sole Provider, Safety Net, System)
- Low response rate of surveys returned (less than 16%
- Medium response rate of surveys returned (16% - 30%)
- High response rate of surveys returned (greater than 30%)
- CMS Region 1 (includes CT, MA, ME, NH, RI, VT)
- CMS Region 2 (includes NJ, NY)
- CMS Region 3 (includes DC, DE, MD, PA, VA, WV)
- CMS Region 4 (includes AL, FL, GA, KY, MS, NC, SC, TN)
- CMS Region 5 (includes IL, IN, MI, MN, OH, WI)
- CMS Region 6 (includes AR, LA, NM, OK, TX)
- CMS Region 7 (includes IA, KS, MO, NE)
- CMS Region 8 (includes CO, MT, ND, SD, UT, WY)
- CMS Region 9 (includes AZ, CA, HI, NV)
- CMS Region 10 (includes AK, ID, OR, WA)

Survey Tool

The release of the HCAPHS© survey provided the first standardized survey tool for patient experience that could be shared across all hospitals in the country for common reporting. Prior to the use of this tool, hospitals collected data on their patients' experiences based on their individual hospital's determination of appropriate information. The HCAHPS© allowed for a national standard to create a database for consistent comparisons of a patient satisfaction inpatient stay. The full utilization of the survey for local, regional, and national comparisons of hospitals started in 2008 and was seen as the first effective evaluation of healthcare facilities and how patients viewed their experiences (Center for Medicare and Medicaid Services, HCAHPSonline, n.d.).

As the HCAPHS© continues to be reviewed, CMS specifies three primary goals for future modifications. These include the assurance of a consistent survey tool and implementation for all users so that the data received is considered to be "objective and meaningful", ability to utilize the data publically so hospitals can base improvement initiatives on the findings, and transparency in reporting to incentivize hospitals to improve based on how they are viewed

through patients' perspectives (Center for Medicare and Medicaid Services, HCAHPSonline, n.d.).

Creation and Development of the Survey

The HCAHPS© survey tool originated in 2002 through a partnership between the Centers for Medicare and Medicaid Services (CMS) and the Agency for Healthcare Research and Quality (AHRQ). The creation of the tool was a "rigorous and multi-faceted scientific process". This included requests from the public for measurements, extensive literature review, interviews with healthcare professionals, focus groups utilizing healthcare consumers, input from multiple stakeholders (including healthcare organizations and payers), a pilot test over 3 different states, psychometric analysis, and numerous field tests. Through this work, CMS responded to over one thousand individual public comments. All research on the HCAHPS© is in the public domain and has been cited by numerous researchers for additional healthcare quality research (Centers for Medicare and Medicaid Services, HCAHPSonline, n.d.).

As validation continued, the HCAHPS© received the endorsement of the National Quality Forum in May, 2005. This represented an important acknowledgment from the healthcare industry as this organization promotes "consensus of main healthcare providers, consumer group, professional associations, purchasers, federal agencies and research organizations." (p. 1) By the end of that same year, the Office of Management and Budget gave its approval for the use of public reporting. The first full use of the tool was in October, 2006 with the data first publically available in March 2008 (Centers for Medicare and Medicaid Services, HCAHPSonline, n.d.).

The primary use of the HCAHPS© now is due to the mandate from the PPACA. There are other incentives for data collection, specifically, any hospital that is subject to the Inpatient Prospective Payment System (which includes all Acute Care hospitals) must collect and report

HCAHPS© data for full reimbursement (Centers for Medicare and Medicaid Services, HCAHPSonline, n.d.).

Validity and Reliability

In the HCAHPS© pilot study from 2002, there were 66 items as opposed to the 32 that are currently approved. The initial 66 items were utilized in the 2002 pilot study that took place in Arizona (7 hospitals), Maryland (6 hospitals), and New York (11 hospitals). Hospital characteristics from each state included at least one from the following list.

- Academic medical center
- Urban, non-academic medical center
- Large suburban hospital
- Rural hospital
- Smaller size (<250 beds) suburban hospital

The goal was at least 450 respondents for each hospital divided between medical, surgical, and obstetrics service lines, which represented the most common clinical encounters (CAHPS© Investigators & AHRQ, p. 2-1-2-2).

The dates for inclusion in the pilot study were December 2002 and January 2003 for medical and surgical patients along with obstetrics patients in November 2002, December 2002, and January 2003. Participation in the pilot required at least one overnight stay. Patients who were younger than 18 years of age at the time of discharge patients with an admission diagnosis relating to behavioral health issues, substance abuse treatment, obstetrics patients who had delivered stillborn or had a miscarriage, observation status, or a discharge status of anything other than "home" were excluded (CAHPS© Investigators & AHRQ, p. 2-4).

Once the participant list was identified from the hospitals, the discharged patients were mailed questionnaires to their home addresses. To increase credibility, state-specific letterhead and signatures were incorporated on all mailing. After ten days, a reminder /thank you card was sent as a follow-up. If after 4 weeks, a participant had not responded, a telephone follow-up was

utilized along with a second mailed questionnaire. Additionally, a total of 5 follow-up phone calls were utilized for non-responders to improve participation (CAHPS© Investigators & AHRQ, p. 2-1).

The data received were catalogued based on state, hospital, and inpatient setting to ensure compliance with the inclusion criteria. If any survey was considered incomplete based on data to accurately catalogue, it was discarded from the pilot study (this does not mean that individual survey questions might be left blank). Additionally, if a chosen participant had multiple stays during the timeframe, the most recent stay was kept in the database. Using a random item selection process, the numbers were reduced to 150 for each state so that there would be a manageable count of 450 surveys to analyze (CAHPS© Investigators & AHRQ, p. 2-5).

The analysis of the data included the following.

- Item-missing data rates
- Skip pattern errors
- Item-scale correlations (convergence and discrimination)
- Internal consistency reliability for hypothesized multi-item composites
- Correlations of items and composites with the global ratings of hospital, doctor, and nurse (CAHPS© Investigators & AHRQ, p. 3-1).

The 66 response questions from the original survey (Table 12) were reviewed for correlation to Institute of Medicine's domains of care.

- Respect for patient values
- Preference and expressed needs
- Coordination and integration of care
- Information, communication, and education
- Physical comfort
- Emotional support
- Involvement of friends and family
- Transition and continuity
- Access to care

Table 12 - Original 66 questions from pilot study

Question #	Question Text	Answer Options
Overview		
1	Please confirm the hospital name and approximate discharge date listed on the cover. Is this information right?	1 Yes 2 No. If No, Stop and return this survey.
2	Which option below best describes the reason for this hospital stay?	1 Surgery 2 Childbirth (including caesarian section) 3 Other medical reason
3	About how many nights was this hospital stay?	Enter number of nights:_____
Care from nurses		
4	During this hospital stay, how often did nurses treat you with courtesy and respect?	1 Never 2 Sometimes 3 Usually 4 Always
5	During this hospital stay, how often did nurses listen carefully to you?	1 Never 2 Sometimes 3 Usually 4 Always
6	During this hospital stay, how often did nurses explain things in a way you could understand?	1 Never 2 Sometimes 3 Usually 4 Always
7	During this hospital stay, how often did nurses spend enough time with you?	1 Never 2 Sometimes 3 Usually 4 Always
8	During this hospital stay, did you press the call button?	1 Yes 2 No. If No, Go to Question 10
9	After you pressed the call button, how often did you get help as soon as you wanted it?	1 Never 2 Sometimes 3 Usually

		4 Always
10	We want to know your rating of the care you received from nurses during this hospital stay. Using any number from 0 to 10 where 0 is the worst possible care and 10 is the best possible care, what number would you give the care you got from all the nurses who treated you?	0 Worst possible nurse care 1 2 3 4 5 6 7 8 9 10 Best possible nurse care

Care from doctors

11	During this hospital stay, how often did doctors treat you with courtesy and respect?	1 Never 2 Sometimes 3 Usually 4 Always
12	During this hospital stay, how often did doctors listen carefully to you?	1 Never 2 Sometimes 3 Usually 4 Always
13	During this hospital stay, how often did doctors explain things in a way you could understand?	1 Never 2 Sometimes 3 Usually 4 Always
14	During this hospital stay, how often did doctors spend enough time with you?	1 Never 2 Sometimes 3 Usually 4 Always
15	We want to know your rating of the care you received from doctors during this hospital stay. Using any number from 0 to 10 where 0 is the worst possible care and 10 is the best possible care, what number would you give the care you got from all the doctors who treated you?	0 Worst possible doctor care 1 2 3 4 5 6 7 8 9

		10 Best possible doctor care

Hospital environment

16	During this hospital stay, how often was the temperature in your room comfortable?	1 Never 2 Sometimes 3 Usually 4 Always
17	During this hospital stay, how often were your room and bathroom kept clean?	1 Never 2 Sometimes 3 Usually 4 Always
18	During this hospital stay, how often was the area around your room quiet at night?	1 Never 2 Sometimes 3 Usually 4 Always

Your experience in this hospital

19	During this hospital stay, did you need help from doctors, nurses or other hospital staff with bathing, washing or keeping clean?	1 Never 2 Sometimes 3 Usually 4 Always
20	How often did you get help with bathing, washing or keeping clean as soon as you wanted?	1 Never 2 Sometimes 3 Usually 4 Always
21	During this hospital stay, did you need help from doctors, nurses or other hospital staff in getting to the bathroom or in using a bedpan?	1 Yes 2 No. If No, Go to Question 23
22	How often did you get help in getting to the bathroom or in using a bedpan as soon as you wanted?	1 Never 2 Sometimes 3 Usually 4 Always
23	At any time during this stay, did you share a hospital room with one or more other patients?	1 Yes 2 No. If No, Go to Question 25

24	How often did doctors, nurses, and other hospital staff make sure that you had privacy when they took care of you or talked to you?	1 Never 2 Sometimes 3 Usually 4 Always
25	During this hospital stay, how often did doctors, nurses or other hospital staff involve you in decisions about your treatment as much as you wanted?	1 Never 2 Sometimes 3 Usually 4 Always
26	During this hospital stay, did your family or friends call or come to visit you?	1 Never 2 Sometimes 3 Usually 4 Always
27	During this hospital stay, how often did your family and friends receive the help they needed when they called or visited the hospital?	1 Never 2 Sometimes 3 Usually 4 Always
28	During this hospital stay, when doctors, nurses, or other hospital staff first came to care for you, how often did they introduce themselves?	1 Never 2 Sometimes 3 Usually 4 Always
29	Did you have pain during this hospital stay?	1 Yes 2 No
30	During this hospital stay, did you have to ask for pain medicine?	1 Yes 2 No. If No, Go to Question 32
31	How often did doctors, nurses or other hospital staff respond quickly when you asked for pain medicine?	1 Never 2 Sometimes 3 Usually 4 Always
32	During this hospital stay, how often was your pain well controlled?	1 Never 2 Sometimes 3 Usually 4 Always
33	During this hospital stay, how often did the doctors, nurses or other hospital staff do everything they could to help you with your pain?	1 Never 2 Sometimes 3 Usually 4 Always

34	We want to ask you about medical procedures and tests, for example, drawing blood, taking x-rays, and applying and removing stitches and bandages. During this hospital stay did you have any medical procedures or tests?	1 Yes 2 No . If No, Go to Question 36
35	How often were these tests and procedures done without causing you too much pain?	1 Never 2 Sometimes 3 Usually 4 Always
36	During this hospital stay, were you given any new medicine that you had not taken before?	1 Yes 2 No. If No, Go to Question 42
37	Before giving you any new medicine, how often did doctors, nurses, or other hospital staff tell you the name of the medicine?	1 Never 2 Sometimes 3 Usually 4 Always
38	Before giving you any new medicine, how often did doctors, nurses, or other hospital staff tell you what the medicine was for?	1 Never 2 Sometimes 3 Usually 4 Always
39	Before giving you any new medicine, how often did doctors, nurses, or other hospital staff ask you if you were taking any other medicines or supplements?	1 Never 2 Sometimes 3 Usually 4 Always
40	Before giving you any new medicine, how often did doctors, nurses, or other hospital staff ask if you were allergic to any medicines?	1 Never 2 Sometimes 3 Usually 4 Always
41	Before giving you any new medicine, how often did doctors, nurses, or other hospital staff describe possible side effects of the medicine in a way you could understand?	1 Never 2 Sometimes 3 Usually 4 Always
Admissions		

42	During this hospital stay, were you admitted to this hospital through the Emergency Room?	1 Yes 2 No
43	Think about when you were admitted to the hospital for this stay. Were there any unreasonable delays during the admission process?	1 Yes 2 No
44	A living will is a signed document that gives instructions about the kinds of medical treatment people want, or do not want, if they are not able to speak for themselves. When you were admitted to the hospital for this stay, were you asked if you had a living will?	1 Yes 2 No

Discharge

45	After you left the hospital, did you go directly to your own home, to someone else's home, or to another health facility?	1 Own Home 2 Someone Else's Home 3 Another Health Facility. If Another, Go to Question 52
46	After you left the hospital, did your health condition limit what you were able to do in any way?	1 Yes 2 No. If No, Go to Question 49
47	Before you left the hospital, did you get information in writing about what activities you could and could not do?	1 Yes 2 No
48	Before you left the hospital, did someone talk with you about whether you would have the help you needed when you were discharged?	1 Yes 2 No
49	Before you left the hospital, did you get information in writing about what symptoms or health problems to look out for after you were discharged?	1 Yes 2 No

50	Before you left the hospital, were you told to take any medicine at home that you had not taken before this hospital stay?	1 Yes 2 No. If No, Go to Question 52
51	Before you left the hospital, did you get information in writing about how to take this medicine at home?	1 Yes 2 No
Overall rating of hospital		
52	We want to know your overall rating of this hospital. Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital?	0 Worst possible hospital care 1 2 3 4 5 6 7 8 9 10 Best possible hospital care
53	Would you recommend this hospital to your friends and family?	1 Definitely no 2 Probably no 3 Probably yes 4 Definitely yes
54	What did you like most about the care you received during this hospital stay?	Free form response
55	If you could change one thing about the care you received during this hospital stay, what would it be?	Free form response
About you		
56	In general, how would you rate your overall health now?	1 Excellent 2 Very good 3 Good 4 Fair 5 Poor
57	In general, how would you rate your overall mental or emotional health now?	1 Excellent 2 Very good 3 Good 4 Fair 5 Poor

58	What is your age now?	1 18 to 24 2 25 to 34 3 35 to 44 4 45 to 54 5 55 to 64 6 65 to 74 7 75 to 79 8 80 or older
59	Are you male or female?	1 Male 2 Female
60	What is the highest grade or level of school that you have completed?	1 8th grade or less 2 Some high school, but did not graduate 3 High school graduate or GED 4 Some college or 2-year degree 5 4-year college graduate 6 More than 4-year college degree
61	Are you of Hispanic or Latino origin or descent?	1 Yes, Hispanic or Latino 2 No, not Hispanic or Latino
62	What is your race?	Please choose one or more. 1 White 2 Black or African-American 3 Asian 5 Native Hawaiian or other Pacific Islander 6 American Indian or Alaskan Indian or Alaskan Native 7 Other, (please print)
63	What language do you mainly speak at home?	1 English 2 Spanish 3 Some other language, (please print)
64	Including this hospital stay, how many hospital stays did you have in the last 12 months?	1 One 2 Two 3 Three 4 Four or more stays
65	Did someone help you complete this survey?	1 Yes

		2 No. If no, stop and return this survey
66	How did that person help you?	Check all that apply. 1 Read the questions to me 2 Wrote down the answers I gave 3 Answered the questions for me 4 Translated the questions into my language 5 Helped in some other way, (please print)_____

One of the primary issues found with the original survey was its multiple requirements for "skip logic" or "screening questions" and the confusion it seemed to create based on the responses received. This was found from the beginning on Question 1 (Q1) that asked if the hospital name and discharge date for the inpatient stay was correct. If it was not correct, the respondent was instructed to stop and return the survey. But, even if it was answered "no" or left blank, the remainder of the survey was completed by 269 responders (CAHPS© Investigators & AHRQ, p. 4-1).

As discussed earlier, the pilot study of the HCAHPS© survey evolved from a desire to measure the domains from the Institute of Medicine. In reviewing the initial results of the survey, the researchers attempted to associate each HCAHPS© question to a domain. The results of this association can be viewed in Appendix B. The outcome of this analysis was utilized to propose other domains that might be more appropriate for understanding patients' experiences in the hospital resulting in a reduction to 8 domains ("coordination" did not receive any scores from the analysis and was eliminated) (CAHPS© Investigators & AHRQ, p. 4-3).

Using these 8 domains, an item-scale correlation matrix was created (Appendix C) to determine their use going forward. The researchers hypothesized as to the relationship of the survey questions to each domain with specific concern for the cluster of items. In more than half

of the items, there was not a high correlation to its expected composite. Additionally, there were correlations with other composites. In general, the researchers agreed the "hypothesized structure of the instrument was inconsistent with the observed data.". (CAHPS© Investigators & AHRQ, p. 4-3).

Using exploratory factor analysis, the tool was refined further so that six domains were identified. These included (1) physician comfort (seven items), (2) communication with doctors (five items), (3) communication about medications (five items), (4) communication with nurses (five items), (5) pain control (four items), and (6) discharge information (four items). Items that did not fit into these domains were discarded and included Q28 (introduce self), Q43 (delays in admission), and Q44 (living will) (CAHPS© Investigators & AHRQ, p. 4-3).

Internal consistency reliability scores were reviewed with analysis showing that five of the six questions had a calculation of 0.80 or higher and one of 0.68 (discharge information). Using sensitivity analysis to determine if a "complex or weakly related" items could increase reliability, it was discovered questions considered more "vague" in nature could increase reliability. Examples of this were Q27 (help for visitors) and Q25 (patient involved in treatment decisions) along with Q35 (tests without pain). By removing this question (Q35), the value increased to 0.87 (CAHPS© Investigators & AHRQ, p. 4-4).

From a validity perspective, the scores were compared to the global rating of the hospital (the overall view of the care received) to determine if the patient would recommend the hospital to family or friends. The full data analysis is in Appendix D with the high-level areas addressed in the bullet points below (CAHPS© Investigators & AHRQ, p. 4-5-4-20).

- Case Mix Methods
- Variable selection
- Variable component analysis

- Response rate analysis
- Item non-response

Open-ended Questions

Lastly, the pilot HCAHPS© survey included two open-ended questions intended to enhance the results of the survey questions (Q54 and Q55). Since these questions had free-form comments, the analysis was based on a qualitative approach. The comments were coded from a sample to determine if specific themes or if information obtained that would be considered outside of the HCAHPS© domains (CAHPS© Investigators & AHRQ, p. 4-21).

From the 16,048 surveys returned, 200 cases were randomly pulled and coded from those in English and 100 cases from those in Spanish. By utilizing these surveys, the Spanish-speaking responses were over-sampled from the English at a rate of 17.5% to 1.3% of total (CAHPS© Investigators & AHRQ, p. 4-21).

Once the coding of the responses was completed, the codes were aligned to specific HCAHPS© questions where possible. If more than one code was appropriate for a response, multiple codes were allowed. The findings (Appendix E) reveal that five is the highest number of codes applied to any response (CAHPS© Investigators & AHRQ, p. 4-21).

Overall, this analysis revealed little information that would enhance the HCAHPS© survey. Most comments did not answer the question or were duplicative of responses in the quantitative portion. The areas beyond the scope of the HCAHPS©' domain included the following.

- Staff – general about staff friendliness, helpfulness, or treatment that could not be attributed specifically to nursing or physician staff
- Care coordination – coordinating care with doctors, nurses, and other staff within the hospital, or with the patients' primary care physician, or other providers outside the hospital
- Food – taste and quality of that served in the hospital
- Timeliness – delays in care outside of the admission process and delays in discharge
- Language – ability of hospital staff to speak the language of the patient (CAHPS© Investigators & AHRQ, p. 4-22)

Through this lengthy analysis, several recommendations were made that resulted in changes to the pilot survey to be incorporated into the survey for full use. Additionally, it was shown the recommendations were not purely tied to the statistical calculations, but were also based on the "substantive understanding of healthcare" by the researchers as they drew upon their own expertise and experiences (i.e., "communication about medications" and "discharge information"). They took into account for inclusion, deletion, or re-wording of specific question by responses to the February 5 and June 27, 2003 notices from the *Federal Register* that requested comments on the HCAHPS© survey and its implementation (CAHPS© Investigators & AHRQ, p. 5-1).

As a summary, Table 13 summarizes the changes that occurred to the pilot tool based on this cumulative input from these sources. (CAHPS© Investigators & AHRQ, p. 5-2-5-10). Additional detailed information on these changes are available in Appendices F and G.

Table 13 - Changes to HCAHPS© survey based on pilot test results

Question	Change	Reason
1, 2, 3	Deleted	Information is available from administrative record
4, 5, 6	Retained	Covariance statistics supported their use as a composite; they discriminated among hospitals and they were highly related to patients' ratings of overall care in the hospital
7	Deleted	The version of this question that was used in the "doctor communication" composite
8	Deleted	Filter question for Q9; lack of variability
9	Modified	Added option "I never pressed the call button"
10	Retained	Discriminated among hospitals and was highly related to patients' ratings of overall care in the hospital
11, 12, 13	Retained	Co-variation statistics supported their use as a composite and they were related to patients' ratings of overall care in the hospital

14	Deleted	Weakly discriminated among hospitals; item was not related to patients' ratings of overall care in the hospital
15	Retained	Related to patients' ratings of overall care in the hospital and it is parallel to the rating of overall care from nurses
16	Deleted	Weakly discriminated among hospitals
17, 18	Retained	Highly related to patients' ratings of overall care in the hospital; co-variation statistics indicated further study regarding the possibility that they might be scored as a composite measure of hospital environment
19, 20	Deleted	Weakly discriminated among hospitals; focus groups identified this as less an issue than assistance with toileting
21, 22	Retained	Reliably discriminated among hospitals and was judged by patients to be one of the more important items in the "Nursing Services" composite
23, 24	Deleted	Covariance statistics did not support its use in a composite and it did not discriminate among hospitals; focus groups showed a great difference in interpreting this question
25	Deleted	Covariance statistics did not support the scoring of this item as part of a composite; cognitive interviews conducted indicated that respondents had a difficult time determining what was meant by this item
26, 27	Deleted	Patients were being asked to report on the experience of others in contradiction to the survey design principle that respondents should be asked to restrict reporting to their own personal experience
28	Deleted	Weaker relationship to its composite than other items in the composite and did not discriminate among hospitals as well as the other items in the composite
29	Deleted	Redundant with Q30
30	Modified	In recognition of the fact that patients often receive such medication without asking for it, the text was changed to "…did you need medicine for pain?"
31	Deleted	Other items in the "pain control" composite could be used to measure that concept

32, 33	Retained	Covariance statistics supported scoring them as a composite measure and they were significantly related to patients' ratings of their overall care
34, 35	Deleted	Covariance statistics did not support its scoring into a composite measure; not significantly related to patients' ratings of their overall care; did not discriminate among hospitals; cognitive testing had revealed that the item was difficult to understand
36	Retained	Screener for subsequent items
37, 38, 39	Deleted	Not strongly related to patients' overall experience of their care
40, 41	Retained	Further study needed in the future based on researcher views that theoretically important to patient care
42, 43, 44	Deleted	Not related to patients' overall ratings of hospital care and covariance statistics did not support its use in a composite; cognitive testing showed that many patients did not understand the meaning of questions
45	Retained	Analytic purposes
46	Deleted	Screener question unnecessary
47	Deleted	Not related to patients' overall evaluations of their hospital care; did not discriminate very well among hospitals
48, 49	Retained	Related to overall evaluations of care and both discriminated among hospitals
50, 51	Deleted	Not related to patients' overall evaluations of their hospital care; did not discriminate very well among hospitals
52, 53	Retained	Discriminated among hospitals and considered summary measures of overall care
54, 55	Deleted	Patients responded to them and a content analysis of a random sample of these questions revealed little additional information
56, 57, 58, 59, 60, 61,	Retained	Characterize the care of particular subsets of patients; needed for case mix adjustment of scores for inter-hospital

62, 63		comparisons
64	Deleted	Did not contribute information over and above that contributed by self reports of health
65, 66	Retained	Standard questions in all CAPHS© survey tools

Seven Domains

The seven domains that evolved in the HCAHPS© include the following (Centers for Medicare and Medicaid Services, Fact Sheet, 2015).

- Communication with nurses
- Communication with doctors
- Education on medications
- Instructions at discharge
- Cleanliness of facility
- Experience within the hospital
- Overall rating of hospital

These domains are represented in the finalized HCAPS© survey in Figure 4.

HCAHPS Survey

SURVEY INSTRUCTIONS

- You should only fill out this survey if you were the patient during the hospital stay named in the cover letter. Do not fill out this survey if you were not the patient.
- Answer <u>all</u> the questions by checking the box to the left of your answer.
- You are sometimes told to skip over some questions in this survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:

  ☐ Yes
  ☑ No ➔ ***If No, Go to Question 1***

You may notice a number on the survey. This number is used to let us know if you returned your survey so we don't have to send you reminders.
Please note: Questions 1-25 in this survey are part of a national initiative to measure the quality of care in hospitals. OMB #0938-0981

Please answer the questions in this survey about your stay at the hospital named on the cover letter. Do not include any other hospital stays in your answers.

YOUR CARE FROM NURSES

1. During this hospital stay, how often did nurses treat you with <u>courtesy and respect</u>?

[1] ☐ Never
[2] ☐ Sometimes
[3] ☐ Usually
[4] ☐ Always

2. During this hospital stay, how often did nurses <u>listen carefully to you</u>?

[1] ☐ Never
[2] ☐ Sometimes
[3] ☐ Usually
[4] ☐ Always

3. During this hospital stay, how often did nurses <u>explain things</u> in a way you could understand?

[1] ☐ Never
[2] ☐ Sometimes
[3] ☐ Usually
[4] ☐ Always

4. During this hospital stay, after you pressed the call button, how often did you get help as soon as you wanted it?

[1] ☐ Never
[2] ☐ Sometimes
[3] ☐ Usually
[4] ☐ Always
[9] ☐ I never pressed the call button

YOUR CARE FROM DOCTORS

5. During this hospital stay, how often did doctors treat you with courtesy and respect?

1 ☐ Never
2 ☐ Sometimes
3 ☐ Usually
4 ☐ Always

6. During this hospital stay, how often did doctors listen carefully to you?

1 ☐ Never
2 ☐ Sometimes
3 ☐ Usually
4 ☐ Always

7. During this hospital stay, how often did doctors explain things in a way you could understand?

1 ☐ Never
2 ☐ Sometimes
3 ☐ Usually
4 ☐ Always

THE HOSPITAL ENVIRONMENT

8. During this hospital stay, how often were your room and bathroom kept clean?

1 ☐ Never
2 ☐ Sometimes
3 ☐ Usually
4 ☐ Always

9. During this hospital stay, how often was the area around your room quiet at night?

1 ☐ Never
2 ☐ Sometimes
3 ☐ Usually
4 ☐ Always

YOUR EXPERIENCES IN THIS HOSPITA

10. During this hospital stay, did you need help from nurses or other hospital staff in getting to the bathroom or in using a bedpan?

1 ☐ Yes
2 ☐ No ➔ **If No, Go to Question 12**

11. How often did you get help in getting to the bathroom or in using a bedpan as soon as you wanted?

1 ☐ Never
2 ☐ Sometimes
3 ☐ Usually
4 ☐ Always

12. During this hospital stay, did you need medicine for pain?

1 ☐ Yes
2 ☐ No ➔ **If No, Go to Question 15**

13. During this hospital stay, how often was your pain well controlled?

1 ☐ Never
2 ☐ Sometimes
3 ☐ Usually
4 ☐ Always

14. During this hospital stay, how often did the hospital staff do everything they could to help you with your pain?

1 ☐ Never
2 ☐ Sometimes
3 ☐ Usually
4 ☐ Always

15. During this hospital stay, were you given any medicine that you had not taken before?

[1] ☐ Yes
[2] ☐ No ➔ **If No, Go to Question 18**

16. Before giving you any new medicine, how often did hospital staff tell you what the medicine was for?

[1] ☐ Never
[2] ☐ Sometimes
[3] ☐ Usually
[4] ☐ Always

17. Before giving you any new medicine, how often did hospital staff describe possible side effects in a way you could understand?

[1] ☐ Never
[2] ☐ Sometimes
[3] ☐ Usually
[4] ☐ Always

WHEN YOU LEFT THE HOSPITAL

18. After you left the hospital, did you go directly to your own home, to someone else's home, or to another health facility?

[1] ☐ Own home
[2] ☐ Someone else's home
[3] ☐ Another health facility ➔ **If Another, Go to Question 21**

19. During this hospital stay, did doctors, nurses or other hospital staff talk with you about whether you would have the help you needed when you left the hospital?

[1] ☐ Yes
[2] ☐ No

20. During this hospital stay, did you get information in writing about what symptoms or health problems to look out for after you left the hospital?

[1] ☐ Yes
[2] ☐ No

OVERALL RATING OF HOSPITAL

Please answer the following questions about your stay at the hospital named on the cover letter. Do not include any other hospital stays in your answers.

21. Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital during your stay?

[0] ☐ 0 Worst hospital possible
[1] ☐ 1
[2] ☐ 2
[3] ☐ 3
[4] ☐ 4
[5] ☐ 5
[6] ☐ 6
[7] ☐ 7
[8] ☐ 8
[9] ☐ 9
[10] ☐ 10 Best hospital possible

22. Would you recommend this hospital to your friends and family?

[1] ☐ Definitely no
[2] ☐ Probably no
[3] ☐ Probably yes
[4] ☐ Definitely yes

UNDERSTANDING YOUR CARE WHEN YOU LEFT THE HOSPITAL

23. During this hospital stay, staff took my preferences and those of my family or caregiver into account in deciding what my health care needs would be when I left.

[1] ☐ Strongly disagree
[2] ☐ Disagree
[3] ☐ Agree
[4] ☐ Strongly agree

24. When I left the hospital, I had a good understanding of the things I was responsible for in managing my health.

[1] ☐ Strongly disagree
[2] ☐ Disagree
[3] ☐ Agree
[4] ☐ Strongly agree

25. When I left the hospital, I clearly understood the purpose for taking each of my medications.

[1] ☐ Strongly disagree
[2] ☐ Disagree
[3] ☐ Agree
[4] ☐ Strongly agree
[5] ☐ I was not given any medication when I left the hospital

ABOUT YOU

There are only a few remaining items left.

26. During this hospital stay, were you admitted to this hospital through the Emergency Room?

[1] ☐ Yes
[2] ☐ No

27. In general, how would you rate your overall health?

[1] ☐ Excellent
[2] ☐ Very good
[3] ☐ Good
[4] ☐ Fair
[5] ☐ Poor

28. In general, how would you rate your overall mental or emotional health?

[1] ☐ Excellent
[2] ☐ Very good
[3] ☐ Good
[4] ☐ Fair
[5] ☐ Poor

29. What is the highest grade or level of school that you have completed?

[1] ☐ 8th grade or less
[2] ☐ Some high school, but did not graduate
[3] ☐ High school graduate or GED
[4] ☐ Some college or 2-year degree
[5] ☐ 4-year college graduate
[6] ☐ More than 4-year college degree

30. Are you of Spanish, Hispanic or Latino origin or descent?

- [1] ☐ No, not Spanish/Hispanic/Latino
- [2] ☐ Yes, Puerto Rican
- [3] ☐ Yes, Mexican, Mexican American, Chicano
- [4] ☐ Yes, Cuban
- [5] ☐ Yes, other Spanish/Hispanic/Latino

31. What is your race? Please choose one or more.

- [1] ☐ White
- [2] ☐ Black or African American
- [3] ☐ Asian
- [4] ☐ Native Hawaiian or other Pacific Islander
- [5] ☐ American Indian or Alaska Native

32. What language do you <u>mainly</u> speak at home?

- [1] ☐ English
- [2] ☐ Spanish
- [3] ☐ Chinese
- [4] ☐ Russian
- [5] ☐ Vietnamese
- [6] ☐ Portuguese
- [9] ☐ Some other language (please print): _____

THANK YOU

Please return the completed survey in the postage-paid envelope.

[NAME OF SURVEY VENDOR OR SELF-ADMINISTERING HOSPITAL]

[RETURN ADDRESS OF SURVEY VENDOR OR SELF-ADMINISTERING HOSPITAL]

Figure 4 – HCAHPS© survey.

Mode

The HCAHPS© survey is mailed to patients meeting specific criteria (18 year old+, discharged to home, non-prisoner, behavioral health patient) 48 hours to 6 weeks after an inpatient discharge with a return envelope included. The patients' preferred language is captured and the survey can be sent in English, Spanish, Russian, Chinese, Vietnamese, or Portuguese. If a patient does not return the survey, a telephone call is placed to the patient's home phone number for an interview. The survey is conducted in either English or Spanish by an approved vendor of CMS and a standardized script is provided (Appendix H). Additionally, an interactive voice response script is provided in both English and Spanish if required by the patient (Centers for Medicare and Medicaid Services, 2015, Survey Instrument).

Universality of the Survey

To underscore the importance and credibility of the HCAHPS©, the survey is utilized in the United States and several other countries for the measurement of patient satisfaction. Currently, these countries include the United Kingdom, Canada, Australia, and Denmark. As of 2012, the HCAHPS© survey is being translated and tested in additional countries such as Belgium, Finland, Germany, Greece, Ireland, The Netherlands, Norway, Poland, Spain, Sweden and Switzerland. Although not necessarily tied to reimbursement within other countries due to differences in payment and system methodologies, it does emphasize the significance of performance improvement to the hospitals (Squires et al., 2012).

Research Design

This study utilized secondary data based on survey responses from the HCAPHS© database that is in the public domain available at https://data.medicare.go/Hospital-Compare/Pateint-survey-HCAHPS-Hospital/dgck-syfz. The data are available on a fiscal year calendar starting July.

Creation of Database

The database used for the analysis was created by the researcher by downloading data from the CMS HCAHPS© website. Once downloaded and saved in Excel, all extemporaneous fields were hidden (e.g., hospital street address, telephone number, etc.). The remaining fields were specific to the hospital identifier, domain, and top box HCAHPS© score.

Independent variables were added as column headings to a spreadsheet and each column filled by coding that variable. Since all coding was as nominal variables, codes were 0 = NO and 1 = YES. Explained differently, if the hospital met the conditions of the characteristic, it was coded (1) and if it did not, it was coded (0).

Dependent Variable Presentation

The downloaded database included filters on rows that are not associated with the Top Box scores. By ensuring that only Top Box rows were included, the database was maximized for efficiency for the coding. Because there are 11 domains with one Top Box score, the expected database size was 11 lines per hospital multiplied by the total number of hospitals (3,109).

Independent Variable Choices

The choices of the independent variables used do not represent all characteristics that hospitals in the United States might possess. These are meant to show a large range of hospitals representing different demographic, financial structure, external designations and technological

use. The choices of these characteristics was an attempt to view different aspects of hospitals to determine if there is a potential one or combination of variables that may serve to generate discussion on how patients' perceive the care they received.

IRB Approval

Though this is a secondary data analysis utilizing data from the public domain, Institutional Review Board approval was requested. This will allow for all future publications that request this data to be fulfilled. No specific patient identifying information was captured as all data were aggregated at the hospital level. There is no known risk to anyone in this study as all data has been documented and viewable through the public internet for analytical and informational purposes.

Data Analysis

Using the developed database, the data was analyzed with the goal of identifying independent variables or clusters of variables that show significant power in predicting HCAHPS© score for each domain. The domains were kept separate for each analysis as the belief is that each characteristic can have a different association on the dependent variable. Basic descriptors of the data were reported for dependent and independent variables.

Multiple Regression

The objective of this study is to examine correlations between the independent variables (hospital characteristics) and the dependent variable (HCAHPS© scores). This was accomplished through multiple regression within SPSS. This statistical calculation will allow for a prediction of patient satisfaction scores based on the hospital and allow for an understanding of how much variation in the patient satisfaction score is due to the hospital characteristics.

When utilizing multiple regression, there are unique assumptions that must be true for this calculation to be considered valid. These assumptions are below.

- Independence of errors (residuals)
- A linear relationship between the predictor variables (and composite) and the dependent variable
- Homoscedasticity of residuals (equal error variances)
- No multicollinearity
- No significant outliers or influential points
- Errors (residuals) are normally distributed

To ensure that each assumption is met, it was checked prior to analysis. The first assumption will be to ensure an approximate value of 2.00 based on the Durbin-Watson test (Laerd Statistics, 2015). By reviewing this value (it will fall in a range of 0.00 to 4.00), it would show there is no correlation between residuals. If this data were entered in a way that would have artificially created correlations, then it would be observed through this test.

The second assumption is to test for linear relationships between the dependent and independent variable. This can be assessed through the use of a scatterplot of each variable.

The third assumption confirms homoscedasticity, which ensures that there is equal variation between the error (or that the variation is not seen in just one area). This can be seen in a scatterplot diagram by ensuring that the residuals (error) are equally spread across the predicted values of the dependent variable.

The fourth assumption checks to ensure little multicollinearity. If multicollinearity exists, it would mean independent variables that are highly correlated are measuring the same thing. It would be undeterminable which variable is predicting the outcome of the dependent variable. This assumption can be verified through SPSS by reviewing the correlation table and ensuring there are no correlations greater than 0.7. If multicollinearity is determined, one of the variables can be eliminated and the others remain.

The fifth assumption is to verify there are no outliers in the data. This would mean that there is a data point that does not fit into the usual pattern of data. This can be accomplished in SPSS by using the casewise diagnostics. Any value that is greater or lower than 3.00 standard deviations for each independent variable would be considered an outlier.

Lastly, the variable were checked for normal distributions through the review of a histogram of the data. Normally distributed data will be in the classic "bell-shaped curve" and show the variable is more highly reported at the middle with less data on each end.

Once determined the assumptions were not violated, multiple regression was run. If there are any issues where the assumptions are not validated, this study describes how that was addressed and actions taken to complete the analysis. From the final data calculation in Table 14, the following values were used to analyze the data.

Table 14 - Elements for data analysis

Variable Analysis	**Name**	**Meaning**
R	Multiple Correlation Coefficient	Ranging from 0.00 to 1.00, the higher the value, the more closely the dependent variables are predicted by the independent variables
R^2	Coefficient of Determination	Ranging from 0.00 to 1.00, it represents the ratio (percentage) of variation that can be explained in the dependent variables from the independent variables
F	N/A	Represents the statistical significance of the independent variables predicting the independent variables
B	Unstandardized Coefficient	Value for each independent variable used to calculate the predictive value of the dependent variable; equation expressed as Dependent Variable = $B_{constant}$ + ($B_{IndependantVariable1}$ x Independent Variable 1) + ($B_{IndependantVariable2}$ x Independent Variable 2) + …

t	N/A	Value of the statistical significance
Sig	Significance	Represents the p value (significance of the results)
N/A	Lower Bound	Lowest number within the confidence interval
N/A	Upper Bound	Highest number within the confidence interval

Findings Display

The findings will be displayed with descriptive statistics identified first with the multiple regression analysis following. Tables 15, 16, and 17 are used as the basis for the data reporting. These will be repeated for each dependent variable (HCAHPS© domain).

Table 15 – Sample data display: Domain X, Variable Combination: Means, Standard Deviations, and Intercorrelations

Variable	M	SD	1	2	3	4	5	6	7	8	9
1st dependent variable											
Predictor variable											
1. Ind. Var. 1			-								
2. Ind. Var. 2				-							
3. Ind. Var. 3					-						
4. Ind. Var. 4						-					
5. Ind. Var. 5							-				
6. Ind. Var. 6								-			
7. Ind. Var. 7									-		
8. Ind. Var. 8										-	
9. Ind. Var. 9											-

Table 16 - Sample data display: Domain X, Variable Combination: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Ind. Var. 1					
Ind. Var. 2					
Ind. Var. 3					
Ind. Var. 4					
Ind. Var. 5					
Ind. Var. 6					
Ind. Var. 7					
Ind. Var. 8					
Ind. Var. 9					

Table 17- Sample data display: Domain X, Variable Combination: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
	HCAHPS© Score =			

Data Limitations

The data analyzed within this study has several limitations. First, there are no qualitative data comments included. As discussed earlier, these were removed from the initial survey as they did not appear to add substantial information to the final results. But, Huppertz and Smith (2014) argue against the removal since patients have become savvier in their understanding of healthcare delivery since the pilot test was utilized in 2002. Hospitals are now receiving

completed HCAHPS© with handwritten comments in the margins that researchers believe would provide a more robust assessment based on their views.

Second, an alternative view has been documented even with an exhaustive pilot test. A study from 2014 casts doubt on the validity and reliability of the HCAHPS©. Woodstock, Babakus, and Grant (2014, p. 98) express concern that literature is still limited on the validity and reliability of the survey and question its use as the "gold standard" as one component for basing financial payments to hospitals. The concern is rooted in the idea there are some elements cannot be assessed by those impacted even if the patients were involved in the specific encounter (Darby & Karni, 1973). This is connected to the patient experience in a hospital and directly to the HCAHPS© tool in areas where the patients might have a perception of the level of care, expertise, or overall view of a hospital stay, but due to their limited understanding, perceptions could be unrelated to the score that would be given from an expert trained in the field and would not be a fair assessment especially when tied to reimbursement.

Several examples are displayed within this study. The domain of "cleanliness of the facility" is one of the first areas addressed. Because there is an impression of cleanliness (or lack thereof), it does not mean that the facility was either clean or dirty. There could be distinct markers of cleanliness and uncleanliness, but it does not speak to the full expertise needed and the evaluation required to determine if a hospital is actually "clean" (Woodstock, Babakus, & Grant, 2014, p. 99). Additionally, the sample raises concerns on the patients' lack of understanding of the background processes that continually take place and the ability to actually assess whether or not the care they received was "correct" since there are many clinical issues a patient would not understand (p. 100).

Even though Woodstock, Babakus and Grant (2014, p. 100) do concede that within their studies and subsequent research that the current survey tool is a strong start to assessing the healthcare delivery system, it is flawed. They continually point to the issue that a national standard that scores perceptions should never be confused with a score that would calculate reality of the actual care provided during the hospital stay.

Third, and potentially the most important, is the data captured do not align with payment periods (Centers for Medicare and Medicaid Services, 2015, Introduction HCHAPS© survey training, p. 29). The data are captured 2 years prior and posted once a quarter. The data used in this study were from the June 2015 posting, and collected from July 2013 through June 2014. Many changes to the hospitals could have taken place in that timeframe which would prevent a "real time" assessment from taking place.

Fourth, and connected to the third point, is that the coding of the independent variables has taken place over a 10 month period from the time that the HCAHPS© scores were downloaded. The impact would be less since these characteristics change more slowly than internal processes, but it is possible that a hospital coded for a specific variable at one point could be different than when the HCAPHS© data were collected.

CHAPTER 4 - FINDINGS

The data analysis of this study is displayed through a geographical representation of the independent variables and the statistical analysis through multiple regression for each domain that includes combinations of the independent variables. Due to quantity of tables generated based on number of domains, combination of independent variables analyzed, and the number of key data points calculated with each, the detailed multiple regression analyses are included in Appendices I - S with summary of key information provided in this chapter.

Description of Independent Variables and Variable Combinations

Maps of Hospital Types

The independent variables (hospital characteristics) that are used in this study include Academic, Baldrige, Faith Based, For Profit, MAGNET™, Most Wired™, Safety Net, and Sole Provider. Initially System was to be included, but based on its impact to the multiple regression by significantly lowering predictability and statistical significance for all domains, it was removed. This negative impact to the study is believed to be based on the broad definition that was included for the system variable. The criteria for having two or more hospitals defining a system represented an over count since most hospitals are currently part of a system of this nature along with the fact that these systems range from two to dozens of hospitals within one system. Additionally, these systems may share little in common other than multiple owned hospitals.

For hospital characteristics that were used, these maps are included in Figures 5 – 28. Each characteristic shows the location of corresponding hospitals in the continental United States, Alaska, and Hawaii. If no hospital existed on a map, it is noted as "NO [hospital characteristic] IN [location]." This was used specifically for Alaska and Hawaii.

The visual representation of the characteristics reveal trends that contribute to understanding of the data. Academic hospitals (Figures 5 - 7) are clustered on the eastern portion of the U.S correlating to larger academic institutions. Baldrige hospitals (Figures 8 -10) have a very low number in comparison to other characteristics, but have an interesting cluster in the upper midwest. Faith-based hospitals (Figures 11 - 13) have a strong presence in New England, central areas of the country, and on the west coast. For-profit hospitals (Figures 14 – 16) appear to have centered in areas across the southeast, which corresponds to the headquarters of the three largest for-profit systems. These are HCA, headquartered in Nashville, TN, Tennet Healthcare, headquartered in Dallas, TX, and Community Health Systems, headquartered in Brentwood, TN. MAGNET™ hospitals (Firgures 17 – 19) are most prevalent on the east coast while Most Wired™ (Figures 20 – 22) hospitals are primarily east and midwest.

With the Safety Net Hospitals (Figures 23 – 25), hospital location becomes strongly associated with patient population needs as this characteristic can be tied to socio-economic demographics. The final characteristic, Sole Provider (Figures 26 – 28), has an inverse relationship to population centers since they are located in remote or sparsely populated regions.

Academic Hospitals – n = 115

Figure 5 – Academic Hospitals in the Continental United States

Figure 6 – Academic Hospitals in Alaska –
NO ACADEMIC HOSPITALS IN ALASKA

Figure 7 –Academic Hospitals in Hawaii
NO ACADEMIC HOSPITALS IN HAWAII

Baldrige Hospitals – n = 27

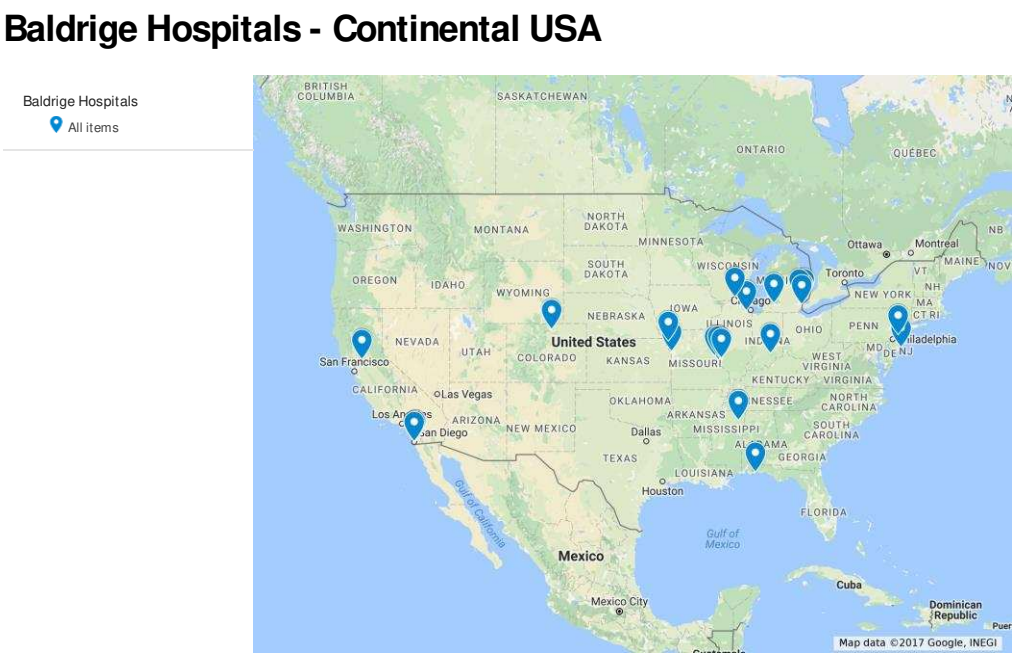

Figure 8 – Baldrige Hospitals in the Continental United States

Figure 9 – Baldrige Hospitals in Alaska

Figure 10 – Baldrige Hospitals in Hawaii
NO BALDRIGE HOSPITALS IN HAWAII

Faith Based Hospitals – n = 630

Figure 11 – Faith Based Hospitals in the Continental United States

Figure 12 – Faith Based Hospitals in Alaska

Figure 13 – Faith Based Hospitals in Hawaii

For Profit Hospitals – n = 632

Figure 14 – For Profit Hospitals in the Continental United States

Figure 15 - For Profit Hospitals in Alaska

Figure 16 – For Profit Hospitals in Hawaii
NO FOR PROFIT HOSPITALS IN HAWAII

MAGNET™ Hospitals – n = 330

Figure 17 – MAGNET™ Hospitals in the Continental United States

Figure 18 – MAGNET™ Hospitals in Alaska

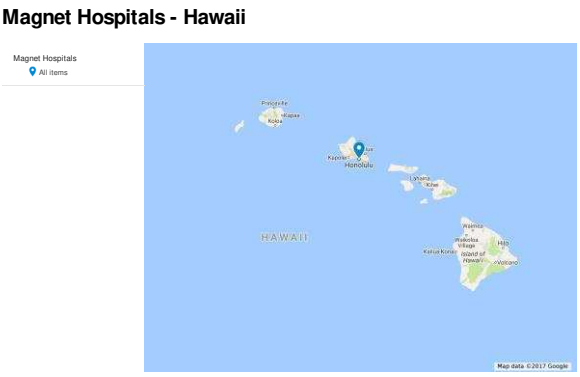

Figure 19 – MAGNET™ Hospitals in Hawaii

Most Wired™ Hospitals – n = 630

Figure 20 – Most Wired™ Hospitals in the Continental United States

Figure 21 – Most Wired™ Hospitals in Alaska

Figure 22 – Most Wired™ Hospitals in Hawaii

Safety Net Hospitals – n = 781

Figure 23 – Safety Net Hospitals in the Continental United States

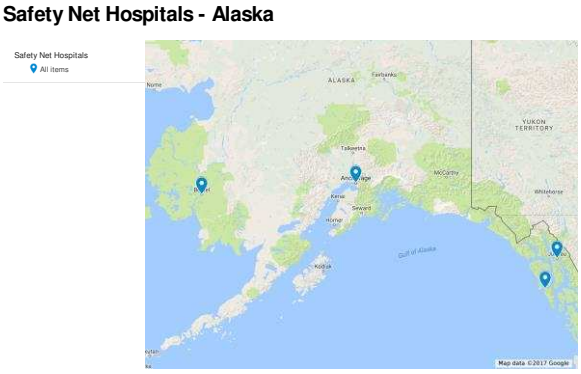

Figure 24 – Safety Net Hospitals in Alaska

Figure 25 – Safety Net Hospitals in Hawaii

Sole Provider Hospitals – n = 426

Figure 26 – Sole Provider Hospitals in the Continental United States

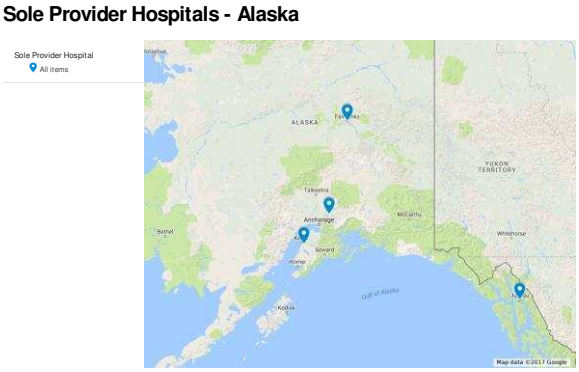

Figure 27 – Sole Provider Hospitals in Alaska

Figure 28 – Sole Provider Hospitals in Hawaii

CMS Regions

The Centers for Medicare and Medicaid Services denotes 10 geographical regions used for administrative purposes. These regions are shown below and with the states associated with each one. Puerto Rico and Guam, even though part of CMS oversight, were excluded from this study so that all comparisons would be for states and the District of Columbia.

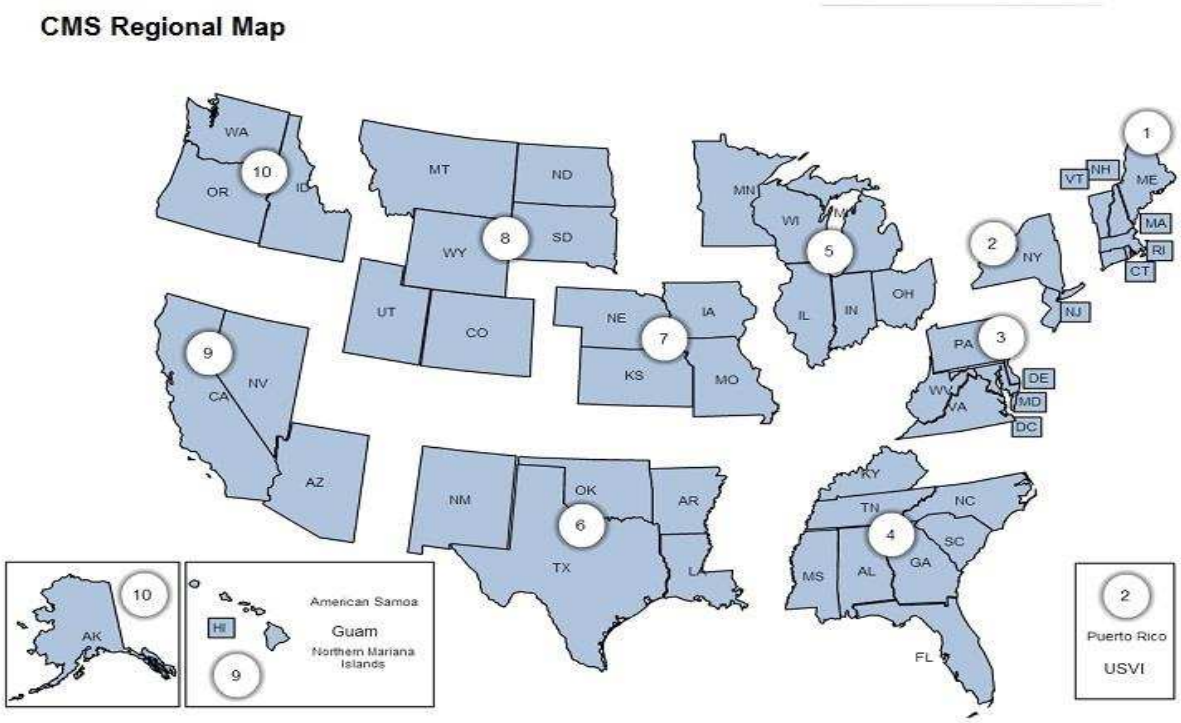

Figure 29 - CMS Regional Map

HCAHPS© Multiple Regression Analysis

Analysis of the study's data included multiple regression of all HCAHPS© domains utilizing independent variables in multiple combinations. The breakdown of the data follows in Tables 18 through 28 and is organized by domain. Within each domain, the data were analyzed through the following combinations.

- All variables
- Variables that required an application (Baldrige, MAGNET™, and Most Wired™)
- Variables with no application required (Academic, Faith Based, For Profit, Sole Provider, and Safety Net)
- Low response rate to survey (less than 16%)
- Medium response rate to survey (16% to 30%)
- High response rate to survey (greater than 30%)
- CMS regions 1 through 10

Percentages for response rates were chosen based on an equal distribution where 1/3 of the total responses fell within one of these categories.

Tables 29 through 44 present the same data, but with HCAHPS© domains within each variable combination. This is a strong representation of the data as it shows a cross section of how hospitals were scored. This representation also identifies themes that would not have been available based on the original methods design. For these tables, an average of the R^2 and Adjusted R^2 is calculated to allow for a macro level comparison of the findings.

The approach of utilizing multiple combinations of variables instead of the initial plan to review regression on a single hospital characteristic and an overall combination of predictors was modified due to the consistently low values that were calculated for the R^2 and Adjusted R^2 on initial reviews. By using combination of variables based on shared characteristics, a more revealing study was created. This change was unexpected, as planning had been based on the belief the individual characteristics would allow for differences in hospitals to be seen quantitatively. When this was proven to be unsupported based on the data, a secondary review

of the CMS HCAHPS© database and the list of hospitals was undertaken to determine other potential drivers of patient satisfaction that could be examined at a lower level while remaining true to the original hypothesis of patient satisfaction predictability tied to hospital characteristics. This resulted in the updated study methods and provided information on patient satisfaction perceptions that had been unexpected due to unique variable combinations.

All data assumptions for multiple regression as documented in Chapter 3 were verified. Backward regression was initially utilized, but did not impact the results and was disregarded due to the current size of the analysis.

Data Summary by Domain

Table 18 - Domain 1, Nursing Communication, summary of findings by variable combination

Domain 1 – Nursing Communication	**R^2**	**Adjusted R^2**	**Sig**
All variables	0.125	0.123	0.000
Non-application	0.010	0.010	0.000
Application	0.120	0.120	0.000
Response Rate Low	0.120	0.080	0.008
Response Rate Med	0.123	0.119	0.000
Response Rate High	0.081	0.076	0.000
Region 1	0.147	0.098	0.006
Region 2	0.425	0.402	0.000
Region 3	0.155	0.134	0.000
Region 4	0.202	0.193	0.000
Region 5	0.135	0.122	0.000
Region 6	0.127	0.114	0.000
Region 7	0.165	0.124	0.000
Region 8	0.364	0.319	0.000
Region 9	0.273	0.257	0.000
Region 10	0.082	0.007	0.374

Table 19 - Domain 2, Doctor Communication, summary of findings by variable combination

Domain 2 – Doctor Communication	**R^2**	**Adjusted R^2**	**Sig**
All variables	0.036	0.033	0.000
Non-application	0.005	0.004	0.002
Application	0.033	0.031	0.000
Response Rate Low	0.087	0.031	0.154
Response Rate Med	0.058	0.053	0.000
Response Rate High	0.036	0.031	0.000
Region 1	0.075	0.023	0.200
Region 2	0.186	0.153	0.000
Region 3	0.073	0.050	0.003
Region 4	0.151	0.141	0.000
Region 5	0.044	0.029	0.003
Region 6	0.076	0.063	0.000
Region 7	0.068	0.022	0.168
Region 8	0.340	0.293	0.000
Region 9	0.208	0.190	0.000
Region 10	0.060	-0.016	0.616

Table 20 - Domain 3, Responsiveness of Staff, summary of findings by variable combination

Domain 3 – Responsiveness of Staff	**R^2**	**Adjusted R^2**	**Sig**
All variables	0.106	0.104	0.000
Non-application	0.004	0.003	0.008
Application	0.103	0.101	0.000
Response Rate Low	0.182	0.131	0.001
Response Rate Med	0.109	0.104	0.000
Response Rate High	0.071	0.066	0.000
Region 1	0.165	0.118	0.002
Region 2	0.316	0.289	0.000
Region 3	0.132	0.111	0.000
Region 4	0.123	0.113	0.000
Region 5	0.153	0.140	0.000
Region 6	0.158	0.145	0.000
Region 7	0.053	0.007	0.337
Region 8	0.265	0.212	0.000
Region 9	0.211	0.193	0.000
Region 10	0.099	0.026	0.227

Table 21 - Domain 4, Pain Control, summary of findings by variable combination

Domain 4 – Pain Control	**R^2**	**Adjusted R^2**	**Sig**
All variables	0.070	0.067	0.000
Non-application	0.006	0.005	0.000
Application	0.066	0.065	0.000
Response Rate Low	0.087	0.031	0.157
Response Rate Med	0.070	0.065	0.000
Response Rate High	0.030	0.024	0.000
Region 1	0.107	0.050	0.079
Region 2	0.074	0.037	0.049
Region 3	0.088	0.065	0.000
Region 4	0.097	0.086	0.000
Region 5	0.096	0.082	0.000
Region 6	0.065	0.051	0.000
Region 7	0.079	0.034	0.091
Region 8	0.102	0.038	0.136
Region 9	0.187	0.168	0.000
Region 10	0.056	-0.021	0.663

Table 22 - Domain 5, Room and Bathroom Cleanliness summary of findings by variable combination

Domain 5 – Room and Bathroom Cleanliness	**R^2**	**Adjusted R^2**	**Sig**
All variables	0.077	0.074	0.000
Non-application	0.002	0.001	0.089
Application	0.075	0.074	0.000
Response Rate Low	0.172	0.121	0.003
Response Rate Med	0.060	0.055	0.000
Response Rate High	0.084	0.079	0.000
Region 1	0.149	0.101	0.005
Region 2	0.074	0.037	0.049
Region 3	0.181	0.161	0.000
Region 4	0.124	0.114	0.000
Region 5	0.139	0.125	0.000
Region 6	0.076	0.063	0.000
Region 7	0.092	0.048	0.041
Region 8	0.160	0.100	0.010
Region 9	0.131	0.112	0.000
Region 10	0.118	0.046	0.124

Table 23 - Domain 6, Facility Quietness, summary of findings by variable combination

Domain 6 – Facility Quietness	**R^2**	**Adjusted R^2**	**Sig**
All variables	0.017	0.015	0.000
Non-application	0.009	0.008	0.000
Application	0.012	0.011	0.000
Response Rate Low	0.089	0.034	0.142
Response Rate Med	0.015	0.010	0.004
Response Rate High	0.046	0.041	0.000
Region 1	0.099	0.048	0.071
Region 2	0.074	0.037	0.049
Region 3	0.076	0.054	0.002
Region 4	0.124	0.114	0.000
Region 5	0.019	0.004	0.270
Region 6	0.059	0.046	0.000
Region 7	0.052	0.005	0.357
Region 8	0.102	0.038	0.136
Region 9	0.092	0.072	0.000
Region 10	0.042	-0.037	0.829

Table 24 - Domain 7, Medication Education, summary of findings by variable combination

Domain 7 – Medication Education	**R^2**	**Adjusted R^2**	**Sig**
All variables	0.060	0.057	0.000
Non-application	0.002	0.001	0.122
Application	0.059	0.057	0.000
Response Rate Low	0.115	0.060	0.051
Response Rate Med	0.069	0.064	0.000
Response Rate High	0.039	0.034	0.000
Region 1	0.083	0.031	0.145
Region 2	0.312	0.285	0.000
Region 3	0.085	0.063	0.001
Region 4	0.138	0.128	0.000
Region 5	0.092	0.078	0.000
Region 6	0.067	0.053	0.000
Region 7	0.062	0.016	0.227
Region 8	0.154	0.092	0.016
Region 9	0.199	0.181	0.000
Region 10	0.150	0.080	0.037

Table 25 - Domain 8, Discharge Instructions, summary of findings by variable combination

Domain 8 – Discharge Instructions	**R^2**	**Adjusted R^2**	**Sig**
All variables	0.163	0.161	0.000
Non-application	0.023	0.022	0.000
Application	0.153	0.151	0.000
Response Rate Low	0.090	0.034	0.142
Response Rate Med	0.111	0.106	0.000
Response Rate High	0.087	0.082	0.000
Region 1	0.050	-0.004	0.484
Region 2	0.347	0.321	0.000
Region 3	0.086	0.063	0.001
Region 4	0.094	0.084	0.000
Region 5	0.193	0.181	0.000
Region 6	0.122	0.109	0.000
Region 7	0.225	0.187	0.000
Region 8	0.460	0.421	0.000
Region 9	0.263	0.247	0.000
Region 10	0.053	-0.024	0.700

Table 26 - Domain 9, Care Transitions, summary of findings by variable combination

Domain 9 – Care Transitions	**R^2**	**Adjusted R^2**	**Sig**
All variables	0.134	0.132	0.000
Non-application	0.025	0.024	0.000
Application	0.125	0.124	0.000
Response Rate Low	0.148	0.096	0.009
Response Rate Med	0.160	0.156	0.000
Response Rate High	0.064	0.059	0.000
Region 1	0.136	0.087	0.010
Region 2	0.333	0.306	0.000
Region 3	0.182	0.162	0.000
Region 4	0.200	0.190	0.000
Region 5	0.125	0.112	0.000
Region 6	0.120	0.107	0.000
Region 7	0.174	0.134	0.000
Region 8	0.249	0.195	0.000
Region 9	0.262	0.245	0.000
Region 10	0.109	0.036	0.169

Table 27 - Domain 10, Overall Hospital Rating, summary of findings by variable combination

Domain 10 – Overall Hospital Rating	**R^2**	**Adjusted R^2**	**Sig**
All variables	0.163	0.161	0.000
Non-application	0.045	0.044	0.000
Application	0.143	0.142	0.000
Response Rate Low	0.119	0.065	0.038
Response Rate Med	0.159	0.155	0.000
Response Rate High	0.046	0.041	0.000
Region 1	0.247	0.205	0.000
Region 2	0.444	0.422	0.000
Region 3	0.203	0.183	0.000
Region 4	0.238	0.229	0.000
Region 5	0.172	0.159	0.000
Region 6	0.131	0.118	0.000
Region 7	0.258	0.222	0.000
Region 8	0.400	0.357	0.000
Region 9	0.345	0.331	0.000
Region 10	0.134	0.063	0.070

Table 28 - Domain 11, Willingness to Recommend Hospital, summary of findings by variable combination

Domain 11 – Willingness to Recommend Hospital	**R^2**	**Adjusted R^2**	**Sig**
All variables	0.225	0.223	0.000
Non-application	0.080	0.079	0.000
Application	0.189	0.188	0.000
Response Rate Low	0.107	0.052	0.069
Response Rate Med	0.242	0.238	0.000
Response Rate High	0.162	0.158	0.000
Region 1	0.238	0.195	0.000
Region 2	0.381	0.356	0.000
Region 3	0.262	0.244	0.000
Region 4	0.320	0.312	0.000
Region 5	0.218	0.206	0.000
Region 6	0.211	0.199	0.000
Region 7	0.322	0.289	0.000
Region 8	0.419	0.378	0.000
Region 9	0.366	0.352	0.000
Region 10	0.160	0.092	0.024

Data Summary by Variables and Variable Combinations

Table 29 - All variables, summary of findings by domain

All variables	**R^2**	**Adjusted R^2**	**Sig**
Domain 1 - Nursing Communication	0.125	0.123	0.000
Domain 2 - Doctor Communication	0.036	0.033	0.000
Domain 3 - Responsiveness of Staff	0.106	0.104	0.000
Domain 4 - Pain Control	0.070	0.067	0.000
Domain 5 - Room and Bathroom Cleanliness	0.077	0.074	0.000
Domain 6 - Facility Quietness	0.017	0.015	0.000
Domain 7 - Medication Education	0.060	0.057	0.000
Domain 8 - Discharge Instructions	0.163	0.161	0.000
Domain 9 - Care Transitions	0.134	0.132	0.000
Domain 10 - Overall Hospital Rating	0.163	0.161	0.000
Domain 11 - Willingness to Recommend Hospital	0.225	0.223	0.000
AVERAGE	0.107	0.105	

Table 30 - Application variables, summary of findings by domain

Application	**R^2**	**Adjusted R^2**	**Sig**
Domain 1 - Nursing Communication	0.010	0.010	0.000
Domain 2 - Doctor Communication	0.005	0.004	0.002
Domain 3 - Responsiveness of Staff	0.004	0.003	0.008
Domain 4 - Pain Control	0.006	0.005	0.000
Domain 5 - Room and Bathroom Cleanliness	0.002	0.001	0.089
Domain 6 - Facility Quietness	0.009	0.008	0.000
Domain 7 - Medication Education	0.002	0.001	0.122
Domain 8 - Discharge Instructions	0.023	0.022	0.000
Domain 9 - Care Transitions	0.025	0.024	0.000
Domain 10 - Overall Hospital Rating	0.045	0.044	0.000
Domain 11 - Willingness to Recommend Hospital	0.080	0.079	0.000
AVERAGE	0.019	0.018	

Table 31 - Non-Application variables, summary of findings by domain

Non-application	R^2	Adjusted R^2	Sig
Domain 1 - Nursing Communication	0.120	0.120	0.000
Domain 2 - Doctor Communication	0.033	0.031	0.000
Domain 3 - Responsiveness of Staff	0.103	0.101	0.000
Domain 4 - Pain Control	0.066	0.065	0.000
Domain 5 - Room and Bathroom Cleanliness	0.075	0.074	0.000
Domain 6 - Facility Quietness	0.012	0.011	0.000
Domain 7 - Medication Education	0.059	0.057	0.000
Domain 8 - Discharge Instructions	0.153	0.151	0.000
Domain 9 - Care Transitions	0.125	0.124	0.000
Domain 10 - Overall Hospital Rating	0.143	0.142	0.000
Domain 11 - Willingness to Recommend Hospital	0.189	0.188	0.000
AVERAGE	0.098	0.097	

Table 32 - Response Rate Low, summary of findings by domain

Response Rate Low	R^2	Adjusted R^2	Sig
Domain 1 - Nursing Communication	0.120	0.080	0.008
Domain 2 - Doctor Communication	0.087	0.031	0.154
Domain 3 - Responsiveness of Staff	0.182	0.131	0.001
Domain 4 - Pain Control	0.087	0.031	0.157
Domain 5 - Room and Bathroom Cleanliness	0.172	0.121	0.003
Domain 6 - Facility Quietness	0.089	0.034	0.142
Domain 7 - Medication Education	0.115	0.060	0.051
Domain 8 - Discharge Instructions	0.090	0.034	0.142
Domain 9 - Care Transitions	0.148	0.096	0.009
Domain 10 - Overall Hospital Rating	0.119	0.065	0.038
Domain 11 - Willingness to Recommend Hospital	0.107	0.052	0.069
AVERAGE	0.120	0.067	

Table 33 - Response Rate Medium, summary of findings by domain

Response Rate Medium	R^2	Adjusted R^2	Sig
Domain 1 - Nursing Communication	0.123	0.119	0.000
Domain 2 - Doctor Communication	0.058	0.053	0.000
Domain 3 - Responsiveness of Staff	0.109	0.104	0.000
Domain 4 - Pain Control	0.070	0.065	0.000
Domain 5 - Room and Bathroom Cleanliness	0.060	0.055	0.000
Domain 6 - Facility Quietness	0.015	0.010	0.004
Domain 7 - Medication Education	0.069	0.064	0.000
Domain 8 - Discharge Instructions	0.111	0.106	0.000
Domain 9 - Care Transitions	0.160	0.156	0.000
Domain 10 - Overall Hospital Rating	0.159	0.155	0.000
Domain 11 - Willingness to Recommend Hospital	0.242	0.238	0.000
AVERAGE	0.107	0.102	

Table 34 - Response Rate High, summary of findings by domain

Response Rate High	R^2	Adjusted R^2	Sig
Domain 1 - Nursing Communication	0.081	0.076	0.000
Domain 2 - Doctor Communication	0.036	0.031	0.000
Domain 3 - Responsiveness of Staff	0.071	0.066	0.000
Domain 4 - Pain Control	0.030	0.024	0.000
Domain 5 - Room and Bathroom Cleanliness	0.084	0.079	0.000
Domain 6 - Facility Quietness	0.046	0.041	0.000
Domain 7 - Medication Education	0.039	0.034	0.000
Domain 8 - Discharge Instructions	0.087	0.082	0.000
Domain 9 - Care Transitions	0.064	0.059	0.000
Domain 10 - Overall Hospital Rating	0.046	0.041	0.000
Domain 11 - Willingness to Recommend Hospital	0.162	0.158	0.000
AVERAGE	0.068	0.063	

Table 35 - CMS Region 1 summary of findings by domain, n = 131

CMS Region 1	R^2	Adjusted R^2	Sig
Domain 1 - Nursing Communication	0.147	0.098	0.006
Domain 2 - Doctor Communication	0.075	0.023	0.200
Domain 3 - Responsiveness of Staff	0.165	0.118	0.002
Domain 4 - Pain Control	0.107	0.050	0.079
Domain 5 - Room and Bathroom Cleanliness	0.149	0.101	0.005
Domain 6 - Facility Quietness	0.099	0.048	0.071
Domain 7 - Medication Education	0.083	0.031	0.145
Domain 8 - Discharge Instructions	0.050	-0.004	0.484
Domain 9 - Care Transitions	0.136	0.087	0.010
Domain 10 - Overall Hospital Rating	0.247	0.205	0.000
Domain 11 - Willingness to Recommend Hospital	0.238	0.195	0.000
AVERAGE	0.136	0.087	

Table 36 - CMS Region 2 summary of findings by domain, n = 208

CMS Region 2	R^2	Adjusted R^2	Sig
Domain 1 - Nursing Communication	0.425	0.402	0.000
Domain 2 - Doctor Communication	0.186	0.153	0.000
Domain 3 - Responsiveness of Staff	0.316	0.289	0.000
Domain 4 - Pain Control	0.074	0.037	0.049
Domain 5 - Room and Bathroom Cleanliness	0.074	0.037	0.049
Domain 6 - Facility Quietness	0.074	0.037	0.049
Domain 7 - Medication Education	0.312	0.285	0.000
Domain 8 - Discharge Instructions	0.347	0.321	0.000
Domain 9 - Care Transitions	0.333	0.306	0.000
Domain 10 - Overall Hospital Rating	0.444	0.422	0.000
Domain 11 - Willingness to Recommend Hospital	0.381	0.356	0.000
AVERAGE	0.270	0.240	

Table 37 – CMS Region 3 summary of findings by domain, n = 294

CMS Region 3	R^2	Adjusted R^2	Sig
Domain 1 - Nursing Communication	0.155	0.134	0.000
Domain 2 - Doctor Communication	0.073	0.050	0.003
Domain 3 - Responsiveness of Staff	0.132	0.111	0.000
Domain 4 - Pain Control	0.088	0.065	0.000
Domain 5 - Room and Bathroom Cleanliness	0.181	0.161	0.000
Domain 6 - Facility Quietness	0.076	0.054	0.002
Domain 7 - Medication Education	0.085	0.063	0.001
Domain 8 - Discharge Instructions	0.086	0.063	0.001
Domain 9 - Care Transitions	0.182	0.162	0.000
Domain 10 - Overall Hospital Rating	0.203	0.183	0.000
Domain 11 - Willingness to Recommend Hospital	0.262	0.244	0.000
AVERAGE	0.138	0.117	

Table 38 – CMS Region 4 summary of findings by domain, n = 682

CMS Region 4	R^2	Adjusted R^2	Sig
Domain 1 - Nursing Communication	0.202	0.193	0.000
Domain 2 - Doctor Communication	0.151	0.141	0.000
Domain 3 - Responsiveness of Staff	0.123	0.113	0.000
Domain 4 - Pain Control	0.097	0.086	0.000
Domain 5 - Room and Bathroom Cleanliness	0.124	0.114	0.000
Domain 6 - Facility Quietness	0.124	0.114	0.000
Domain 7 - Medication Education	0.138	0.128	0.000
Domain 8 - Discharge Instructions	0.094	0.084	0.000
Domain 9 - Care Transitions	0.200	0.190	0.000
Domain 10 - Overall Hospital Rating	0.238	0.229	0.000
Domain 11 - Willingness to Recommend Hospital	0.320	0.312	0.000
AVERAGE	0.165	0.155	

Table 39 – CMS Region 5 summary of findings by domain, n = 526

CMS Region 5	R^2	Adjusted R^2	Sig
Domain 1 - Nursing Communication	0.135	0.122	0.000
Domain 2 - Doctor Communication	0.044	0.029	0.003
Domain 3 - Responsiveness of Staff	0.153	0.140	0.000
Domain 4 - Pain Control	0.096	0.082	0.000
Domain 5 - Room and Bathroom Cleanliness	0.139	0.125	0.000
Domain 6 - Facility Quietness	0.019	0.004	0.270
Domain 7 - Medication Education	0.092	0.078	0.000
Domain 8 - Discharge Instructions	0.193	0.181	0.000
Domain 9 - Care Transitions	0.125	0.112	0.000
Domain 10 - Overall Hospital Rating	0.172	0.159	0.000
Domain 11 - Willingness to Recommend Hospital	0.218	0.206	0.000
AVERAGE	0.126	0.113	

Table 40 – CMS Region 6 summary of findings by domain, n = 484

CMS Region 6	R^2	Adjusted R^2	Sig
Domain 1 - Nursing Communication	0.127	0.114	0.000
Domain 2 - Doctor Communication	0.076	0.063	0.000
Domain 3 - Responsiveness of Staff	0.158	0.145	0.000
Domain 4 - Pain Control	0.065	0.051	0.000
Domain 5 - Room and Bathroom Cleanliness	0.076	0.063	0.000
Domain 6 - Facility Quietness	0.059	0.046	0.000
Domain 7 - Medication Education	0.067	0.053	0.000
Domain 8 - Discharge Instructions	0.122	0.109	0.000
Domain 9 - Care Transitions	0.120	0.107	0.000
Domain 10 - Overall Hospital Rating	0.131	0.118	0.000
Domain 11 - Willingness to Recommend Hospital	0.211	0.199	0.000
AVERAGE	0.110	0.097	

Table 41 – CMS Region 7 summary of findings by domain, n = 172

CMS Region 7	R^2	Adjusted R^2	Sig
Domain 1 - Nursing Communication	0.165	0.124	0.000
Domain 2 - Doctor Communication	0.068	0.022	0.168
Domain 3 - Responsiveness of Staff	0.053	0.007	0.337
Domain 4 - Pain Control	0.079	0.034	0.091
Domain 5 - Room and Bathroom Cleanliness	0.092	0.048	0.041
Domain 6 - Facility Quietness	0.052	0.005	0.357
Domain 7 - Medication Education	0.062	0.016	0.227
Domain 8 - Discharge Instructions	0.225	0.187	0.000
Domain 9 - Care Transitions	0.174	0.134	0.000
Domain 10 - Overall Hospital Rating	0.258	0.222	0.000
Domain 11 - Willingness to Recommend Hospital	0.322	0.289	0.000
AVERAGE	0.141	0.099	

Table 42 – CMS Region 8 summary of findings by domain, n = 121

CMS Region 8	R^2	Adjusted R^2	Sig
Domain 1 - Nursing Communication	0.364	0.319	0.000
Domain 2 - Doctor Communication	0.340	0.293	0.000
Domain 3 - Responsiveness of Staff	0.265	0.212	0.000
Domain 4 - Pain Control	0.102	0.038	0.136
Domain 5 - Room and Bathroom Cleanliness	0.160	0.100	0.010
Domain 6 - Facility Quietness	0.102	0.038	0.136
Domain 7 - Medication Education	0.154	0.092	0.016
Domain 8 - Discharge Instructions	0.460	0.421	0.000
Domain 9 - Care Transitions	0.249	0.195	0.000
Domain 10 - Overall Hospital Rating	0.400	0.357	0.000
Domain 11 - Willingness to Recommend Hospital	0.419	0.378	0.000
AVERAGE	0.274	0.222	

Table 43 – CMS Region 9 summary of findings by domain, n = 364

CMS Region 9	R^2	Adjusted R^2	Sig
Domain 1 - Nursing Communication	0.273	0.257	0.000
Domain 2 - Doctor Communication	0.208	0.190	0.000
Domain 3 - Responsiveness of Staff	0.211	0.193	0.000
Domain 4 - Pain Control	0.187	0.168	0.000
Domain 5 - Room and Bathroom Cleanliness	0.131	0.112	0.000
Domain 6 - Facility Quietness	0.092	0.072	0.000
Domain 7 - Medication Education	0.199	0.181	0.000
Domain 8 - Discharge Instructions	0.263	0.247	0.000
Domain 9 - Care Transitions	0.262	0.245	0.000
Domain 10 - Overall Hospital Rating	0.345	0.331	0.000
Domain 11 - Willingness to Recommend Hospital	0.366	0.352	0.000
AVERAGE	0.231	.213	

Table 44 – CMS Region 10 summary of findings by domain, n = 107

CMS Region 10	R^2	Adjusted R^2	Sig
Domain 1 - Nursing Communication	0.082	0.007	0.374
Domain 2 - Doctor Communication	0.060	-0.016	0.616
Domain 3 - Responsiveness of Staff	0.099	0.026	0.227
Domain 4 - Pain Control	0.056	-0.021	0.663
Domain 5 - Room and Bathroom Cleanliness	0.118	0.046	0.124
Domain 6 - Facility Quietness	0.042	-0.037	0.829
Domain 7 - Medication Education	0.150	0.080	0.037
Domain 8 - Discharge Instructions	0.053	-0.024	0.700
Domain 9 - Care Transitions	0.109	0.036	0.169
Domain 10 - Overall Hospital Rating	0.134	0.063	0.070
Domain 11 - Willingness to Recommend Hospital	0.160	0.092	0.024
AVERAGE	0.097	0.023	

Themes and Findings

The results of this study showed that variables utilized in an attempt to predict HCAHPS© scores do not have a strong impact on the scores. Based on Cohen's Classification of Effect (Cohen, 1988), all results would be classified as "very small" (Adjusted $R^2 < 0.2$) or "small" (Adjusted R^2 between 0.2 and 0.5). From a domain perspective, the highest averages for all variable combinations was for Domain 10, Overall Hospital Rating, and Domain 11, Willingness to Recommend the Hospital. The Adjusted R^2 were 18.1% and 22.3%, respectively.

When viewing the data based on the variable combination across all domains, the highest averages were calculated based on CMS regions. The highest associations were on CMS Region 2 with an Adjusted R^2 of 24.0%, CMS Region 8 with an Adjusted R^2 of 22.2%, and CMS Region 9 with an Adjusted R^2 of 21.0%.

The highest rating for each domain and variable combinations was within Domain 10, Overall Hospital Rating, for CMS Region 2 at 42.2%.

All data reported above for the highest scores were statistically significant. Overall, statistical significance was very high. Based on 176 unique analyses (11 domains x 16 variable combinations), 141 significance values were less than .05 (80.1%).

The least significant was based on a variable combination for CMS Region 10. Domain 6, Facility Quietness, The significance value was calculated at 0.829 much greater than the determination of significance.

Interestingly, the comparison of response rates showing the most variation explained in the HCHAPS© scores was in hospitals that reported a response rate of between 16% and 30% (medium response rate). Both the low response rate (less than 16%) and the high response rate (greater than 30%) had an average Adjusted R^2 across domains of 6.7% and 6.3%, respectively.

The filtering of hospitals based on their characteristic that required an application versus those that did not require an application resulted in an average Adjusted R^2 of 1.8% and 9.7%, respectively.

As a summary of themes and to pinpoint the unique areas that have an Adjusted $R^2 >$ .190, Table 45 lists each of these variable combinations. Although Cohen (1988) noted "very small" impact, defined as R^2 of < .20, this study included $R^2 <$ .190 due to the prevalence of values that were within this range. This allowed for patterns to be more easily identified.

Table 45 – Calculations of Adjusted $R^2 > .190$ for variable combinations by region

Domain Name	Variable Combination	R^2	Adjusted R^2	Significance
Willingness to Recommend	All variables	0.225	0.223	0.000
Willingness to Recommend	Response Rate Medium	0.242	0.238	0.000
Nursing Communication	CMS Region 2	0.425	0.402	0.000
Responsiveness of Staff	CMS Region 2	0.316	0.289	0.000
Medication Education	CMS Region 2	0.312	0.285	0.000
Discharge Instructions	CMS Region 2	0.347	0.321	0.000
Care Transitions	CMS Region 2	0.333	0.306	0.000
Overall Hospital Rating	CMS Region 2	0.444	0.422	0.000
Willingness to Recommend	CMS Region 2	0.381	0.356	0.000
Willingness to Recommend	CMS Region 3	0.262	0.244	0.000
Overall Hospital Rating	CMS Region 4	0.238	0.229	0.000
Willingness to Recommend	CMS Region 4	0.320	0.312	0.000
Willingness to Recommend	CMS Region 5	0.218	0.206	0.000
Overall Hospital Rating	CMS Region 7	0.258	0.222	0.000
Willingness to Recommend	CMS Region 7	0.322	0.289	0.000
Nursing Communication	CMS Region 8	0.364	0.319	0.000
Doctor Communication	CMS Region 8	0.340	0.293	0.000
Responsiveness of Staff	CMS Region 8	0.265	0.212	0.000
Discharge Instructions	CMS Region 8	0.460	0.421	0.000
Care Transitions	CMS Region 8	0.249	0.195	0.000
Overall Hospital Rating	CMS Region 8	0.400	0.357	0.000
Willingness to Recommend	CMS Region 8	0.419	0.378	0.000
Nursing Communication	CMS Region 9	0.273	0.257	0.000
Doctor Communication	CMS Region 9	0.208	0.190	0.000
Responsiveness of Staff	CMS Region 9	0.211	0.193	0.000
Discharge Instructions	CMS Region 9	0.263	0.247	0.000
Care Transitions	CMS Region 9	0.262	0.245	0.000
Overall Hospital Rating	CMS Region 9	0.345	0.331	0.000
Willingness to Recommend	CMS Region 9	0.366	0.352	0.000

From Table 45, themes emerge clearly on the highest Adjusted R^2 are concentrated on the domain Willingness to Recommend the Hospital for CMS Region 2 ($R^2 = 0.356$), CMS Region 4 ($R^2 = 0.312$), CMS Region 8 ($R^2 = 0.378$), and CMS Region 9 ($R^2 = 0.352$). This suggests that "Willingness to Recommend the Hospital" holds a stronger meaning to patients than the other domains. As discussed in Chapter 5, it is a pattern as this that should be utilized for a deeper understanding and interpretation of the HCAHPS© survey responses.

CHAPTER 5 - DISCUSSION

Once analyzed, the original question remains; "can hospital characteristics predict patient satisfaction scores?" The results of this study did not show strong predictability, but did raise questions that should be explored in more detail focusing on the patterns that emerged. Hospitals continue to work through a rapidly and radically changing healthcare sector with an increasingly strong emphasis on reimbursement methodologies that underscore the patient as consumer. Because of this need for understanding of the drivers of patients' perceptions will continue to grow. It is through continued analysis of possible impacting variables that will a valid prediction model be created.

Conclusions and Implications

The unexpected findings came from the inclusion of the CMS regions in the analysis. Because the initial results did not show strong explanations in variation, it was believed by exploring different combinations of variables, there would be a clearer understanding provided of drivers of HCAHPS© scores. While no combination of variables showed definitive prediction of patients' perceptions, it is extremely interesting the most useful were geographic region. It is open to interpretation as to why this would be the strongest predictors, but appears to drive research into identifying potential cultural attributes (e.g., traditions, belief systems, ethnic prevalence, educational attainment, etc.) from geographic regions and how those attributes translate interpretation of data that measures satisfaction.

Additionally, it is important to note that when looking at the domains for highest values regardless of the variable combination, the highest scores were for Domain 10, Overall Hospital Ranking (R^2 = .161), and Domain 11, Willingness to Recommend Hospital (R^2 = .223). As documented in Chapter 2, these two domains have been emphasized by industry professionals as

potentially the most important domains as they are intended to show the overall hospital experience and are not limited to a specific scope of care within one area of the hospital.

Overall, this study emphasizes the journey to find primary drivers of patient satisfaction scoring on the HCAHPS© tool remains elusive. As underscored by literature from Chapter 2 addressing patient satisfaction being based on the individuality of the patient (Boissey et al., 2016; Cliff, 2012; Huppertz & Smith, 2012; Morsem, Bottorff & Hutchinson, 1994; Walker, 2002), there appears to be a driver to focus on the unique need of the patient being treated. Therefore, can the culture of the hospital conform to fit that need and understand the perceptions of the patients? Human beings are complex and when coupled with a health concern, their responses do not fit into easily defined categories. From an organizational performance aspect, the desire to tie this work to the culture of the organization remains a logical foundation for research, but the way the hospitals' cultures are portrayed in quantifiable aspects such as characteristics will need to be further explored and debated.

Limitations

This study is limited by the number of variables that were noted and by how those variables can be sub-divided. The initial variables were seen as common representatives (characteristics) of hospitals that may have unique cultures and impact the patients' experiences, but there are many more characteristics that could be used.

It is important to review the individual domains with a simple regression. Because of initial analysis, it was believed that the analysis of the individual domains would not be valuable and be prohibitive due to number of analyses required, but it is a possibility that the results from that work could lead to additional insights especially if the domains could be examined focusing on patient demographics (i.e., English as a first language, education level, socio-economic level, ethnicity, etc.). Patient demographics are not available through the public domain. Because the

demographic questions are not publically available, this data would have to be obtained through special permission from CMS or from a representative survey of patients in a hospital.

The definitions of the characteristics have been shown to have room for interpretation (e.g., the reason System was discarded). An additional review of System could allow the variable to be utilized if a stricter definition was applied. This could include a range of number of hospitals or hospitals in a specific region of the country that are connected by a common entity.

There is an argument that the remaining characteristics could be more subjective than was intended. Examples of this would be Academic where the coding criteria was for a specific medical school that was directly tied to a hospital. When coding for this variable, many hospitals are seen as "teaching hospitals", but do not have a specific medical school associated with them. These were not coded in this study based on the definition, but it could be seen as academic if there is direct teaching involved. Also, the For Profit characteristic was found to have a broader definition than intended. Because it was described as a public or private institution that was outside of the not-for-profit criteria, it was coded as for profit. This could cause differences in the attempt to understand culture as a large organization that is publicly traded is quite different than a smaller organization that is privately owned.

Lastly, due to the rapidly changing nature of the healthcare sector, the coding could have misrepresented the current state of any one hospital. Every effort was made to tie the status of the hospital to the same timeframe of the HCAHPS© scores that were being analyzed, but that was not always possible and subjective judgement had to be used for some instances to track timeframe for acquisitions and affiliations. The additional argument to this concern is even if

coded correctly based on the date, the culture might not have had time to change and the hospital might actually function as its previous identification.

Future Research

As the work toward a better understanding of patient satisfaction continues, areas that should be explored are a focus on the organizational culture of organizations and how they drive the perceived care of the patient. This could be addressed through the use of the variables noted in this study, but at a more granular level. Suggestions would be to refine the definitions to allow for more stringent coding or to sub-divide the variables into lower level characteristics. As an example, this could be publicly traded versus privately held within the For Profit characteristic or for the Faith Based characteristic to pull out Catholic hospitals from others since they have such a strong presence in healthcare compared to other religious groups.

Enlarging the scope of variables might include hospital size, education level of clinical staff, demographics of patients served such as percentage of patients who do not speak English as a first language, race, gender, education, payer source, economic status, and diagnosis.

The other three Value Based Purchasing domains that focus on clinical outcomes, quality indicators, and cost efficiency could be incorporated. From an organizational performance perspective, the variables of employee turnover, employee engagement scores, and employee staffing ratios are opportunities for investigation. It would be interesting to review this work from a qualitative perspective that reviews patients' written comments or managerial philosophies from hospital administrators and staff along with interviews from front-line staff members.

Goal of Prediction

Through additional analysis, the goal of creating a successful prediction model should remain at the forefront of the research. If a strong model emerges, the result should not be the

model itself, but the meaning represented by the model. The unique variables or combination of variables that are found to predict patient satisfaction should become triggers to the healthcare organizations to review their internal policies and procedures. They should use the model to compare their own organizational culture to the true drivers of perceptions of patients. These outcomes would need to be translated into practical and applicable changes to daily operations. It will not be enough to understand what patients need and want, but to act on the knowledge and ensure organizations can meet those expectations. By doing this, a hospital moves forward and can succeed in one aspect of the new paradigm of healthcare reform.

Impact from PPACA Debate

As this study is submitted for review, the newly elected administration has noted its desire to repeal the PPACA, although the current debate on what this fully entails is not clear. Most industry analysts agree that even if the law is repealed that the move toward a value based system within the U.S. to address quality and cost will still be in effect. As noted in a recent article of *Modern Healthcare* (Whitman, 2016), "The concept of value in healthcare has been around a long time." This appears to be the prevailing belief that even as healthcare coverage requirements will continue to undergo changes, a focus on ensuring value in healthcare delivery will remain.

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APPENIDIX A – FINALIZED HCAHPS© COVER LETTER, FOLLOW-UP COVER LETTER, AND OMB PAPERWORK REDUCTION ACT LANGUAGE

Sample Initial Cover Letter for the HCAHPS Survey

[HOSPITAL LETTERHEAD]

[SAMPLED PATIENT NAME]
[ADDRESS]
[CITY, STATE ZIP]

Dear [SAMPLED PATIENT NAME]:

Our records show that you were recently a patient at [NAME OF HOSPITAL] and discharged on [DATE OF DISCHARGE]. Because you had a recent hospital stay, we are asking for your help. This survey is part of an ongoing national effort to understand how patients view their hospital experience. Hospital results will be publicly reported and made available on the Internet at www.medicare.gov/hospitalcompare. These results will help consumers make important choices about their hospital care, and will help hospitals improve the care they provide.

Questions 1-25 in the enclosed survey are part of a national initiative sponsored by the United States Department of Health and Human Services to measure the quality of care in hospitals. Your participation is voluntary and will not affect your health benefits.

We hope that you will take the time to complete the survey. Your participation is greatly appreciated. After you have completed the survey, please return it in the pre-paid envelope. Your answers may be shared with the hospital for purposes of quality improvement. [*OPTIONAL*: You may notice a number on the survey. This number is used to let us know if you returned your survey so we don't have to send you reminders.]

If you have any questions about the enclosed survey, please call the toll-free number 1-800-xxx-xxxx. Thank you for helping to improve health care for all consumers.

Sincerely,

[HOSPITAL ADMINISTRATOR]
[HOSPITAL NAME]

Note: The OMB Paperwork Reduction Act language must be included in the mailing. This language can be either on the front or back of the cover letter or questionnaire, but cannot be a separate mailing. The exact OMB Paperwork Reduction Act language is included in this appendix. Please refer to the Mail Only, and Mixed Mode sections, for specific letter guidelines.

Sample Follow-up Cover Letter for the HCAHPS Survey

[HOSPITAL LETTERHEAD]

[SAMPLED PATIENT NAME]
[ADDRESS]
[CITY, STATE ZIP]

Dear [SAMPLED PATIENT NAME]:

Our records show that you were recently a patient at [NAME OF HOSPITAL] and discharged on [DATE OF DISCHARGE]. Approximately three weeks ago we sent you a survey regarding your hospitalization. If you have already returned the survey to us, please accept our thanks and disregard this letter. However, if you have not yet completed the survey, please take a few minutes and complete it now.

Because you had a recent hospital stay, we are asking for your help. This survey is part of an ongoing national effort to understand how patients view their hospital experience. Hospital results will be publicly reported and made available on the Internet at www.medicare.gov/hospitalcompare. These results will help consumers make important choices about their hospital care, and will help hospitals improve the care they provide.

Questions 1-25 in the enclosed survey are part of a national initiative sponsored by the United States Department of Health and Human Services to measure the quality of care in hospitals. Your participation is voluntary and will not affect your health benefits. Please take a few minutes and complete the enclosed survey. After you have completed the survey, please return it in the pre-paid envelope. Your answers may be shared with the hospital for purposes of quality improvement. [*OPTIONAL*: You may notice a number on the survey. This number is used to let us know if you returned your survey so we don't have to send you reminders.]

If you have any questions about the enclosed survey, please call the toll-free number 1-800-xxx-xxxx. Thank you again for helping to improve health care for all consumers.

Sincerely,

[HOSPITAL ADMINISTRATOR]
[HOSPITAL NAME]

Note: The OMB Paperwork Reduction Act language must be included in the mailing. This language can be either on the front or back of the cover letter or questionnaire, but cannot be a separate mailing. The exact OMB Paperwork Reduction Act language is included in this appendix. Please refer to the Mail Only, and Mixed Mode sections, for specific letter guidelines.

OMB Paperwork Reduction Act Language

The OMB Paperwork Reduction Act language must be included in the survey mailing. This language can be either on the front or back of the cover letter or questionnaire, but cannot be a separate mailing. The following is the language that must be used:

English Version

"According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0981. The time required to complete this information collected is estimated to average 8 minutes for questions 1-25 on the survey, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: Centers for Medicare & Medicaid Services, 7500 Security Boulevard, C1-25-05, Baltimore, MD 21244-1850."

APPENDIX B – ASSOCIATION OF HCAHPS© QUESTIONS TO DOMAINS FROM PILOT TEST

	IOM Dimensions								
Item	Respect	Prefs Needs	Coord	Info	Phys Comfort	Emotional Support	Family Friends	Trans	Access
Q1. Hospital name, discharge date									
Q2. Reason in Hosp.									
Q3. Number of nights									
NURSES									
Q4. Courtesy-nurses	$								
Q5. Listen-nurses				$					
Q6. Explain-nurses				$					
Q7. Enough time-nurses						$			
Q8. Call button									
Q9. Help soon as wanted									$
Q10.Global Nurses									
DOCTORS									
Q11.Courtesy-docs	$								
Q12.Listen-docs				$					
Q13.Explain-docs				$					
Q14.Enough time-docs						$			
Q15.Global Docs									
HOSPITAL ENVIRN									
Q16.Temperature					$				
Q17.Clean					$				
Q18.Quiet					$				
YOUR EXPERIENCES									
Q19.Need help bathing, etc.									
Q20. Get help bathing soon									$
Q21.Need help bathroom, etc.									
Q22. Get help bathroom soon									$
Q23. Share room									
Q24. Privacy	$								
Q25.Decisions-You		$							
Q26. Family or friends visit or call									

Item	IOM Dimensions								
	Respect	Prefs Needs	Coord	Info	Phys Comfort	Emotional Support	Family Friends	Trans	Access
Q1. Hospital name, discharge date									
Q2. Reason in Hosp.									
Q3. Number of nights									
NURSES									
Q4. Courtesy-nurses	$								
Q5. Listen-nurses				$					
Q6. Explain-nurses				$					
Q7. Enough time-nurses						$			
Q8. Call button									
Q9. Help soon as wanted									$
Q10.Global Nurses									
DOCTORS									
Q11.Courtesy-docs	$								
Q12.Listen-docs				$					
Q13.Explain-docs				$					
Q14.Enough time-docs						$			
Q15.Global Docs									
HOSPITAL ENVIRN									
Q16.Temperature					$				
Q17.Clean					$				
Q18.Quiet					$				
YOUR EXPERIENCES									
Q19.Need help bathing, etc.									
Q20. Get help bathing soon									$
Q21.Need help bathroom, etc.									
Q22. Get help bathroom soon									$
Q23. Share room									
Q24. Privacy	$								
Q25.Decisions-You		$							
Q26. Family or friends visit or call									

Item	IOM Dimensions								
	Respect	Prefs Needs	Coord	Info	Phys Comfort	Emotional Support	Family Friends	Trans	Access
Q27.Help Family							$		
Q28.Introduce self	$								
Q29.Pain									
Q30.Pain meds									
Q31.Pain quickly					&				
Q32.Pain controlled					&				
Q33.Pain-everything could do					&				
Q34.Tests									
Q35.Test w/o pain					&				
Q36.New med									
Q37.Name of med				$					
Q38.What med for				$					
Q39.Taking other meds				$					
Q40.Allergic to med				$					
Q41.Med side-effect				$					
ADMISSIONS									
Q42.ER									
Q43.Delays									$
Q44.Living will		$							
DISCHARGE									
Q45.Discharge destination									
Q46.Health limit when									
Q47.Activity instructions				$					
Q48.Help after								$	
Q49.Problems to look for								$	
Q50.Take new med at home									
Q51.Med instructions								$	
HOSPITAL OVERALL									
Q52. Global hospital rating									
Q53.Recommend									

Note: $ indicates the domain the item is hypothesized to represent; & indicates subset of pain items within the physical comfort domain.

APPENDIX C – ITEM SCALE CORRELATION MATRIX FROM HCAHPS© PILOT TEST

Item	Respect	Pref Needs	Info	Phys Comfort	Emot Support	Family Friends	Trans	Access
Q4	**0.55**	0.27	0.58	0.55	0.54	0.47	0.20	0.45
Q11	**0.48**	0.28	0.56	0.40	0.55	0.36	0.18	0.30
Q24	**0.50**	0.31	0.48	0.52	0.45	0.44	0.19	0.39
Q28	**0.51**	0.26	0.48	0.43	0.41	0.38	0.20	0.31
Q25	0.54	**0.12**	0.59	0.49	0.55	0.46	0.27	0.39
Q44	0.09	**0.10**	0.08	0.04	0.08	0.08	0.14	0.05
Q5	0.65	0.28	**0.60**	0.58	0.59	0.48	0.21	0.47
Q6	0.60	0.30	**0.63**	0.52	0.58	0.47	0.24	0.43
Q12	0.60	0.28	**0.58**	0.42	0.61	0.38	0.21	0.33
Q13	0.55	0.29	**0.59**	0.40	0.59	0.37	0.22	0.32
Q37	0.47	0.29	**0.64**	0.43	0.41	0.35	0.29	0.34
Q38	0.48	0.29	**0.68**	0.45	0.43	0.37	0.31	0.37
Q39	0.42	0.26	**0.60**	0.40	0.36	0.31	0.26	0.30
Q40	0.41	0.25	**0.57**	0.38	0.33	0.31	0.26	0.29
Q41	0.46	0.29	**0.63**	0.44	0.44	0.34	0.34	0.38
Q47	0.21	0.18	**0.31**	0.18	0.22	0.16	0.52	0.17
Q16	0.33	0.15	0.31	**0.45**	0.29	0.31	0.10	0.28
Q17	0.43	0.19	0.40	**0.49**	0.37	0.36	0.16	0.36
Q18	0.35	0.13	0.33	**0.44**	0.32	0.30	0.11	0.32
Q31	0.57	0.29	0.57	**0.68**	0.53	0.48	0.26	0.52
Q32	0.49	0.25	0.46	**0.62**	0.44	0.42	0.18	0.39
Q33	0.59	0.30	0.55	**0.67**	0.51	0.49	0.23	0.45
Q35	0.33	0.20	0.33	**0.39**	0.34	0.30	0.13	0.26
Q7	0.58	0.29	0.58	0.56	**0.47**	0.48	0.22	0.48
Q14	0.54	0.32	0.58	0.42	**0.47**	0.38	0.22	0.35
Q27	0.55	0.31	0.51	0.54	0.50	----	0.21	0.41
Q48	0.27	0.26	0.34	0.23	0.25	0.22	**0.54**	0.20
Q49	0.21	0.19	0.36	0.18	0.21	0.16	**0.63**	0.17
Q51	0.20	0.18	0.29	0.19	0.19	0.14	**0.46**	0.15
Q9	0.55	0.25	0.55	0.58	0.56	0.46	0.20	**0.55**
Q20	0.56	0.28	0.54	0.59	0.55	0.51	0.27	**0.62**
Q22	0.55	0.29	0.54	0.59	0.54	0.49	0.25	**0.65**
Q43	0.22	0.13	0.22	0.23	0.21	0.17	0.11	**0.51**

Bolded entries are item-scale correlations for hypothesized composites (corrected for item overlap). Dash entry is single item composite.

APPENDIX D – VALIDITY INFORMATION FROM HCAHPS© PILOT TEST

Survey Question	Proportion Response	Between Variance	Within Variance	Between/ Within	Reliability N=100	Reliability N=200	Reliability N=300	Z Value
Rate Nurse (Q10)	98.9	0.0559	3.7242	0.0150	0.597	0.748	0.817	5.81
Rate Doctor (Q15)	98.8	0.0247	3.3214	0.0074	0.423	0.595	0.688	3.50
Rate Hospital (Q52)	98.9	0.0656	3.5765	0.0184	0.645	0.784	0.845	6.63
Nurse Respect (Q4)	99.5	0.0045	0.3794	0.0118	0.540	0.701	0.779	4.77
Nurse Listen (Q5)	99.3	0.0072	0.4906	0.0147	0.593	0.744	0.814	5.56
Nurse Explain (Q6)	99.2	0.0073	0.5464	0.0133	0.569	0.725	0.798	4.90
Nurse Enough Time (Q7)	99.2	0.0093	0.6954	0.0133	0.569	0.725	0.798	5.18
Call Button Response (Q9)	78.2	0.0158	0.6612	0.0239	0.652	0.789	0.849	6.30
MD Respect (Q11)	98.8	0.0017	0.3610	0.0048	0.323	0.488	0.589	2.74
MD Listen (Q12)	98.7	0.0029	0.4912	0.0059	0.368	0.538	0.636	3.04
MD Explain (Q13)	98.7	0.0036	0.4848	0.0075	0.424	0.595	0.688	3.38
MD Enough Time (Q14)	98.5	0.0044	0.6987	0.0063	0.384	0.555	0.652	3.17
Temperature (Q16)	99.0	0.0037	0.5453	0.0068	0.404	0.575	0.670	3.34
Room Clean (Q17)	98.3	0.0056	0.5855	0.0096	0.487	0.655	0.740	4.53
Room Quiet (Q18)	98.3	0.0099	0.7083	0.0140	0.578	0.733	0.804	4.77
How Often Bathing (Q20)	39.4	0.0124	0.8246	0.0150	0.371	0.542	0.639	3.25
How Often Bathroom (Q22)	47.7	0.0113	0.6885	0.0163	0.438	0.609	0.701	3.92
Privacy (Q24)	49.2	0.0024	0.5688	0.0042	0.171	0.293	0.383	1.67
Treatment Decisions (Q25)	97.5	0.0061	0.7289	0.0084	0.451	0.621	0.711	3.98
Family/Friends Get Help (Q27)	93.7	0.0036	0.4664	0.0078	0.423	0.594	0.687	3.75
Staff Introduce (Q28)	98.7	0.0041	0.5191	0.0079	0.437	0.608	0.699	3.66
MD Respond Pain (Q31)	56.3	0.0098	0.6035	0.0162	0.477	0.646	0.732	4.05
Pain Controlled (Q32)	88.2	0.0019	0.5383	0.0036	0.241	0.388	0.488	2.16
MD Pain Help (Q33)	87.5	0.0043	0.5054	0.0085	0.426	0.598	0.690	3.88
Tests Without Pain (Q35)	84.8	0.0021	0.6837	0.0031	0.209	0.345	0.442	1.94
Name of Rx (Q37)	52.6	0.0039	0.8285	0.0047	0.198	0.331	0.426	1.80
Purpose of Rx (Q38)	53.0	0.0022	0.6884	0.0032	0.147	0.256	0.340	1.35
Taking Other Rx (Q39)	52.4	0.0033	0.9636	0.0035	0.154	0.266	0.353	1.41
Allergic to Rx (Q40)	52.7	0.0041	0.7414	0.0055	0.224	0.366	0.464	2.02
Rx Side Effects (Q41)	52.4	0.0119	1.3032	0.0092	0.324	0.490	0.590	2.77
Recommend Hospital (Q53)	98.7	0.0122	0.5326	0.0229	0.693	0.819	0.871	7.33
Delays in Admission (Q43)	97.7	0.0008	0.1225	0.0066	0.391	0.563	0.659	3.46
Living Will (Q44)	92.4	0.0075	0.1574	0.0476	0.815	0.898	0.930	5.98
Activities in Writing (Q47)	71.7	0.0012	0.1079	0.0107	0.435	0.606	0.698	3.48
Help After Discharge (Q48)	71.4	0.0027	0.1376	0.0198	0.586	0.739	0.809	4.47
Symptoms in Writing (Q49)	94.3	0.0019	0.1328	0.0140	0.568	0.725	0.798	4.25
Meds in Writing (Q51)	37.4	0.0004	0.0754	0.0051	0.159	0.274	0.362	1.50

Note: In computing these reliabilities, State and Hospital within State were random effects.

APPENDIX E – CODING FOR QUALITATIVE COMMENTS FROM HCAHPS© PILOT TEST

HCAHPS questionnaire items	What did you like most?		What would you change?	
	English questionnaire (n = 200)	Spanish questionnaire (n = 100)	English questionnaire (n = 200)	Spanish questionnaire (n = 100)
Q4 – How often did nurses treat you with courtesy and respect	19.0%	14.0%	4.5%	7.0%
Q5 – How often did nurses listen carefully to you	0.0%	0.0%	1.0%	0.0%
Q6 – How often did nurses explain things in a way you could understand	1.5%	1.0%	1.5%	0.0%
Q7 – How often did nurses spend enough time with you	3.0%	9.0%	4.5%	3.0%
Q9 – How often did you get help as soon as you wanted it	5.5%	1.0%	5.0%	0.0%
Q10 – Global nurses rating	26.0%	15.0%	7.5%	6.0%
Q11 – How often did doctors treat you with courtesy and respect	3.0%	12.0%	3.0%	2.0%
Q12 – How often did doctors listen carefully to you	0.5%	0.0%	1.5%	0.0%
Q13 – How often did doctors explain things in a way you could understand	3.0%	1.0%	2.5%	0.0%
Q14 – How often did doctors spend enough time with you	1.0%	6.0%	1.0%	1.0%
Q15 – Global doctors rating	11.5%	13.0%	1.5%	3.0%
Q16 – How often was the temperature in your room comfortable	0.0%	0.0%	0.5%	0.0%
Q17 – How often were your room and bathroom kept clean	2.5%	1.0%	3.5%	1.0%
Q18 – How often was the area around your room quiet at night	1.0%	0.0%	5.5%	2.0%
Q20 – How often did you get help with bathing, washing or keeping clean as soon as you wanted	0.0%	0.0%	0.5%	0.0%
Q21 – Did you need help from doctors, nurses or other hospital staff in getting to the bathroom or in using a bedpan	0.0%	0.0%	0.5%	0.0%
Q22 – How often did you get help in getting to the bathroom or in using a bedpan as soon as you wanted	0.0%	0.0%	2.5%	0.0%
Q23 – Did you share a hospital room with one or more other patients	2.0%	1.0%	3.0%	1.0%
Q24 – How often did doctors, nurses, and other hospital staff make sure that you had privacy when they took care of you or talked to you	0.0%	1.0%	0.0%	1.0%
Q25 – Did doctors, nurses or other hospital staff involve you in decisions about your treatment as much as you wanted	0.0%	0.0%	3.0%	0.0%
Q27 – How often did you family and friends receive the help they needed when they called or visited the hospital	0.0%	0.0%	1.0%	1.0%

HCAHPS questionnaire items	What did you like most?		What would you change?	
	English questionnaire (n = 200)	Spanish questionnaire (n = 100)	English questionnaire (n = 200)	Spanish questionnaire (n = 100)
Q28 – When doctors, nurses or other hospital staff first came to care for you, how often did they introduce themselves	0.5%	0.0%	0.5%	0.0%
Q29 – Did you have pain during this hospital stay	1.0%	1.0%	0.0%	2.0%
Q31 – How often did doctors, nurses or other hospital staff respond quickly when you asked for pain medicine	0.0%	0.0%	0.5%	0.0%
Q32 – How often was your pain well controlled	1.5%	0.0%	2.0%	1.0%
Q33 – How often did the doctors, nurses or other hospital staff do everything they could to help you with your pain	0.5%	0.0%	1.5%	1.0%
Q35 – How often were these tests and procedures done without causing you too much pain	1.0%	0.0%	1.5%	0.0%
Q38 – How often did doctors, nurses or other hospital staff tell you what the medicine was for	0.0%	0.0%	1.0%	0.0%
Q41 – How often did doctors, nurses, or other hospital staff describe possible side effects of the medicine in a way you could understand	0.0%	0.0%	0.5%	0.0%
Q42 – Were you admitted to this hospital through the Emergency Room	0.0%	1.0%	3.0%	2.0%
Q43 – Were there any unreasonable delays during the admissions process	0.0%	0.0%	3.5%	3.0%
Q52 – Global hospitals rating	5.0%	20.0%	2.0%	3.0%
Missing	20.0%	6.0%	19.5%	15.0%
Did not like anything/Would not change anything	2.0%	2.0%	21.0%	44.0%
Domains not captured in the HCAHPS questionnaire	**What did you like most?**		**What would you change?**	
	English questionnaire (n = 200)	Spanish questionnaire (n = 100)	English questionnaire (n = 200)	Spanish questionnaire (n = 100)
Care coordination	2.5%	0.0%	1.5%	0.0%
Food	2.5%	8.0%	4.0%	4.0%
Language	0.0%	4.0%	0.5%	9.0%
Staff	25.0%	30.0%	2.5%	2.0%
Timeliness	1.0%	2.0%	2.0%	5.0%
Other	6.5%	9.0%	14.5%	8.0%

APPENDIX F – ADDITIONAL INFORMATION ON CHANGES TO HCAHPS© PILOT TEST – HOSPITAL RATING AND RECOMMENDATION

		Integrity of Composites		Relationship of Item and Composite-Level Scores to Hospital Rating and Recommendation**				Hospital-Level Reliability
Quest #	Question Label	Sub-stantial Corr w 2nd Scale	Alpha & Item-Total Correlation	Hospital Rating		Recommend Hospital		Item z-values (from Table 14)
(5) Discharge Information			**α = .51**	**aR^2=0.08**	**t-value= 16.75**	**aR^2=0.07**	**t-value= 15.89**	
Q49	Symptoms you may have		.34		6.49		8.34	2.18
Q48	Help for you at home?		.34		9.69		7.16	3.93
(6) Pain Control			**α = .83**	**aR^2=0.29**	**t-value= 26.71**	**aR^2=0.23**	**t-value= 23.02**	
Q32	Pain Controlled		.70		5.13		3.37	4.22
Q33	Pain Help All Can		.70		12.43		11.63	4.52
(7) Physical Environment			**α = .60**	**aR^2=0.27**	**t-value= 41.53**	**aR^2=0.20**	**t-value= 24.47**	
Q17	Room Clean		.43		31.18		21.43	4.56
Q18	Room Quite		.39		11.78		3.34	4.81
Q16	Temperature		.40		14.17		6.94	3.32

* aR^2 = Adjusted R-squared, how much variance in the dependent variable is accounted for by the set of items in the composite controlling for the effect of number of variables (i.e., all things being equal, a larger set of items will account for a larger percentage of the variance.

** t-values listed in grey cells are for the unique relationship of this composite to the criterion variable controlling for the other composites. t-values in cells adjacent to the item are for the unique relationship of that item controlling for the other report items in the questionnaire, therefore these are the same values as those depicted in Table 5. Probability of t-value is less than 0.01 unless otherwise denoted.

α = Cronbach's alpha coefficient, an estimate of internal consistency reliability.

APPENDIX G - ADDITIONAL INFORMATION ON CHANGES TO HCAHPS© PILOT TEST – COMPARISON OF HOSITAL, NURSES, DOCTORS RATINGS, AND RECOMMEND HOSPITAL

Hospital Rating		Nurses Rating		Doctors Rating		Recommend Hospital	
Concern for Pt	.72	Concern for Pt	.80	Doctor	.81	Concern for Pt	.63
Nursing Services	.60	Nursing Services	.66	Concern for Pt	.53	Nursing Services	.52
Pain Control	.53	Pain Control	.54	Pain Control	.44	Pain Control	.47
Physical Environment	.52	Physical Environment	.48	Nursing Services	.43	Doctor	.45
Doctor	.49	Doctor	.43	Medication	.36	Physical Environment	.43
Medication	.43	Medication	.42	Physical Environment	.35	Medication	.38
Discharge Info	.28	Discharge Info	.24	Discharge Info	.25	Discharge Info	.26

APPENIDIX H – IRB NOTIFICATION

Colorado State University

Research Integrity & Compliance Review Office
Office of Vice President for Research
Fort Collins, CO 80523-2011
(970) 491-1553
FAX (970) 491-2293

Date: November 30, 2016

To: Carole Makela, Ph.D. Professor, School of Education
Gregory W. O"Barr, Graduate Student, School of Education

From: Evelyn Swiss, CIP, IRB Coordinator

Re: Relationships of Hospital Inpatient Satisfaction Survey Results and Hospital Characteristics: A Quantitative Analysis

After review of information regarding the secondary, de-identified data that were previously collected from the Centers for Medicare and Medicaid Services and are now in the public domain in aggregate form, it was determined that these publicly available data do not meet the requirements of the federal definition of human subject research. "Human subject means a living individual about whom an investigator conducting research obtains data through intervention or interaction with the individual, or identifiable private information" (45CFR46.102(f). Analysis of these data is not under the IRB's purview.

Living individual – Y
About Whom – Y
Intervention/Interaction – N
Identifiable Private Information – N

Thank you for submitting this information. If you have more projects that are similar, please contact us prior to submission. The IRB must determine whether a project needs to have IRB approval.

APPENIDIX I – MULTIPLE REGRESSION ANALYSIS, DOMAIN 1 – NURSING COMMUNICATION

Table 46 – Domain 1, All Variables: Means, Standard Deviations, and Intercorrelations N = 3089

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Nursing Communication Predictor Value	77.96	5.131	.043	-.245	.021	-.002	.045	.087	-.259	.093
1. Faith Based	.20	.402	-	-.237	-.063	-.030	.031	.053	-.080	-.078
2. For Profit	.20	.399		-	-.080	.036	-.047	-.133	.102	-.062
3. Academic	.03	.180			-	.094	.002	.203	.062	-.074
4. Most Wired™	.19	.391				-	.017	.147	-.103	-.098
5. Baldrige	.01	.093					-	.080	-.014	-.027
6. MAGNET™	.11	.309						-	-.103	-.098
7. Safety Net	.25	.433							-	-.019
8. Sole Provider	.14	.344								-

Table 47– Domain 1, All Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.34	(-.91, .24)	-.03	-1.50	.133
For Profit	-2.79	(-3.37, -2.20)	-.22	-12.25	.000
Academic	-.80	(-2.08, .48)	-.03	-1.61	.108
Most Wired™	-.22	(-.80, .36)	-.02	-.97	.332
Baldrige	1.70	(-.71, 4.10)	.03	1.82	.069
MAGNET™	.81	(.05, 1.57)	.05	2.75	.006
Safety Net	-2.75	(-3.27, -2.22)	-.23	-13.50	.000
Sole Provider	1.12	(.46, 1.77)	.08	4.36	.000

Table 48 – Domain 1, All Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
79.08	HCAHPS© Score = 79.08 – .34(Faith Based) – 2.79(For Profit) –.80(Academic) – .22(Most Wired™)+1.70(Baldrige) + .81(MAGNET™) – 2.75(Safety Net) + 1.12(Sole Provider)	.125	.123	.000

Table 49 – Domain 1, Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3089

Variable	*M*	*SD*	1	2	3
Nursing Communication Predictor Value	77.96	5.131	.045	.087	-.002
1. Most Wired™	.01	.093	-	.080	.017
2. Baldrige	.11	.309		-	.147
3. MAGNET™	.19	.391			-

Table 50 – Domain 1, Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Most Wired™	2.11	(-.45, 4.66)	.038	2.13	.03
Baldrige	1.43	(.65, 2.21)	.086	4.74	.00
MAGNET™	-.20	(-.82, .41)	-.015	-.85	.40

Table 51 – Domain 1, Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
77.82	HCAHPS© Score = 77.82 + 2.11(Baldrige) + 1.43(MAGNET™) - .20(Most Wired™)	.01	.01	.000

Table 52 – Domain 1, Non-Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3089

Variable	*M*	*SD*	1	2	3	4	5
Nursing Communication Predictor Value	77.96	1.790	.043	-.245	-.021	-.259	.093
1. Faith Based	.20	.40	-	.043	-.245	-.021	-.259
2. For Profit	.20	.399		-	-.080	.102	-.062
3. Academic	.03	.180			-	.062	-.074
4. Safety Net	.25	.433				-	-.019
5. Sole Provider	.14	.344					-

Table 53 – Domain 1, Non-Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.31	(-.89, .27)	-.02	-1.37	.17
Fort Profit	-2.88	(-3.46, -2.30)	-.22	-12.74	.00
Academic	-.58	(-1.83, .68)	-.02	-1.18	.24
Safety Net	-2.79	(-3.31, -2.27)	-.24	-13.80	.00
Sole Provider	1.06	(.41, 1.72)	.07	4.17	.00

Table 54 – Domain 1, Non-Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
79.16	HCAHPS© Score = 79.16 – .31(Faith Based) – 2.88(For Profit) – .58(Academic) – 2.79(Safety Net) + 1.06(Sole Provider)	.12	.12	.000

Table 55 – Domain 1, Response Rate Low: Means, Standard Deviations, and Intercorrelations, n = 151 (No Baldrige coded 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Nursing Communication Predictor Value	71.19	8.40	.15	.01	.02	.09		.04	-.11	.26
1. Faith Based	.13	.33	-	-.23	-.09	-.02		-.05	-.05	.14
2. For Profit	.27	.44		-	-.14	-.10		-.09	-.02	-.15
3. Academic	.05	.23			-	.06		.18	.08	-.08
4. Most Wired™	.07	.25				-		.15	.10	-.09
5. Baldrige	.00	.00					-			
6. MAGNET™	.02	.14						-	.05	-.05
7. Safety Net	.89	.32							-	.05
8. Sole Provider	.10	.30								-

Table 56 – Domain 1, Response Rate Low: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	3.54	(-1.83, 8.91)	.14	1.72	.089
For Profit	2.13	(-1.95, 6.20)	.11	1.36	.18
Academic	2.44	(-5.47, 10.34)	.07	.80	.42
Most Wired™	4.48	(-2.55, 11.51)	.13	1.66	.10
MAGNET™	2.84	(-9.756, 15,43)	.05	.59	.56
Safety Net	-3.42	(-8.87, 2.04)	-.13	-1.63	.10
Sole Provider	7.76	(1.89, 13.64)	.28	3.45	.00

Table 57 – Domain 1, Response Rate Low: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
71.94	HCAHPS© Score = 71.94 + 3.54(Faith Based) + 2.13(For Profit) + 2.44(Academic) + 4.48(Most Wired™) + 2.84(MAGNET™) – 3.42(MAGNET™) + 7.76(Sole Provider)	.12	.08	.008

Table 58 – Domain 1, Response Rate Medium: Means, Standard Deviations, and Intercorrelations, n = 1531

Variable	M	SD	1	2	3	4	5	6	7	8
Nursing Communication Predictor Value	77.15	4.984	.054	-.301	.015	-.008	.049	.096	-.178	.083
1. Faith Based	.20	.398	-	-.231	-.069	-.003	.012	.084	-.069	-.112
2. For Profit	.20	.401		-	-.102	.021	-.045	-.139	.091	-.037
3. Academic	.05	.2090			-	.118	-.019	.242	.032	-.084
4. Most Wired™	.19	.391				-	-.005	.163	-.099	-.111
5. Baldrige	.01	.088					-	.042	-.015	-.034
6. MAGNET™	.10	.306						-	-.105	-.006
7. Safety Net	.33	.471							-	-.006
8. Sole Provider	.13	.335								-

Table 59 – Domain 1, Response Rate Medium: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.244	(-1.055, .568)	-.019	-.774	.439
For Profit	-3.503	(-4.311, -2.695)	-.282	-11.181	.000
Academic	-.368	(-1.918, 1.181)	-.015	-.613	.540
Most Wired™	-.194	(-1.004, .615)	-.015	-.618	.536
Baldrige	1.949	(-1.559, 5.546)	.034	1.433	.152
MAGNET™	.898	(-1.171, 1.966)	.055	2.167	.030
Safety Net	-1.569	(-2.234, -.903)	-.148	-6.078	.000
Sole Provider	1.095	(.154, 2.036)	.074	3.000	.003

Table 60 – Domain 1, Response Rate Medium: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
78.229	HCAHPS© Score = -78.229 + .244(Faith Based) – 3.503(For Profit) - .368(Academic) - .149(Most Wired™) + 1.949(Baldrige) + .898(MAGNET™) – 1.569(Safety Net) + 1.095(Sole Provider)	.123	.119	.000

Table 61 – Domain 1, Response Rate High: Means, Standard Deviations, and Intercorrelations, n = 1436

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Nursing Communication Predictor Value	79.40	4.144	-.013	-.257	-.029	-.062	.035	.049	-.084	.063
1. Faith Based	.21	.411	-	-.244	-.047	-.064	.046	.021	-.070	-.059
2. For Profit	.19	.396		-	-.042	.064	-.051	-.130	.149	.080
3. Academic	.02	.126			-	.085	.036	.189	.052	-.058
4. Most Wired™	.20	.399				-	.035	.129	-.081	-.093
5. Baldrige	.01	.102					-	.112	.009	-.024
6. MAGNET™	.12	.322						-	-.070	-.105
7. Safety Net	.11	.309							-	.006
8. Sole Provider	.15	.358								-

Table 62 – Domain 1, Response Rate High: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.862	(-1.549, -.175)	-.085	-3.238	.001
For Profit	-2.729	(-3.454, -2.004)	-.261	-9.707	.000
Academic	-1.270	(-3.318, .778)	-.042	-1.600	.110
Most Wired™	-.550	(-1.245, .145)	-.053	-2.041	.041
Baldrige	1.099	(-1.589, 3.788)	.027	1.055	.292
MAGNET™	.361	(-.521, 1.243)	.028	1.055	.292
Safety Net	-.694	(-1.591, .202)	-.052	-1.998	.046
Sole Provider	.383	(-.387, 1.153)	.033	1.282	.200

Table 63 – Domain 1, Response Rate High: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
80.212	HCAHPS© Score = 80.212 - .862(Faith Based) – 2.729(For Profit) – 1.270(Academic) - .550(Most Wired™) + 1.099(Baldrige) + .361(MAGNET™) - .694(Safety Net) + .383(Sole Provider)	.081	.076	.000

Table 64 – Domain 1, Region 1: Means, Standard Deviations, and Intercorrelations, n = 131 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Nursing Communication Predictor Value	78.89	3.763	-.082	-.349	.062	.012		.174	-.088	.039
1. Faith Based	.11	.310	-	-.009	-.082	-.134		.068	-.054	-.099
2. For Profit	.15	.361		-	-.101	.063		-.175	.101	-.042
3. Academic	.05	.226			-	.027		.095	.119	-.068
4. Most Wired™	.24	.427				-		.128	-.153	-.092
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.353						-	-.087	-.037
7. Safety Net	.12	.329							-	-.107
8. Sole Provider	.08	.267								-

Table 65 – Domain 1, Region 1: Regression Analysis Summary for Hospital Characteristics Predicting HCAHPS© Scores for All Characteristics

Variable	B	99% CI	β	t	p
Faith Based	-1.125	(-3.841, 1.590)	-.093	-1.084	.280
For Profit	-3.353	(-5.694, -1.011)	-.322	-3.747	.000
Academic	.290	(-3.429, 4.009)	.017	.204	.839
Most Wired™	-.016	(-2.024, 1.991)	-.002	-.021	.983
MAGNET™	1.270	(-1.131, 3.672)	.119	1.384	.169
Safety Net	-.581	(-3.174, 2.013)	-.051	-.586	.559
Sole Provider	.235	(-2.911, 3.381)	.017	.196	.845

Table 66 – Domain 1, Region 1: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
80.375	HCAHPS© Score = 80.375 - 1.125(Faith Based) – 3.353(For Profit) + .290(Academic) - .016(Most Wired™) + 1.270(MAGNET™) - .581(Safety Net) + .235(Sole Provider)	.147	.098	.006

Table 67 – Domain 1, Region 2: Means, Standard Deviations, and Intercorrelations, n = 208

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Nursing Communication Predictor Value	75.18	5.334	-.073	-.061	.032	.145	.052	.349	-.584	.034
1. Faith Based	.13	.332	-	-.080	-.098	-.026	-.037	.032	-.041	-.109
2. For Profit	.04	.204		-	-.055	-.017	-.021	-.046	.026	-.061
3. Academic	.06	.243			-	.183	-.025	.072	.061	-.075
4. Most Wired™	.14	.347				-	-.040	.254	-.096	-.012
5. Baldrige	.01	.098					-	.075	-.061	-.028
6. MAGNET™	.20	.399						-	-.146	-.143
7. Safety Net	.28	.450							-	-.099
8. Sole Provider	.08	.267								-

Table 68 – Domain 1, Region 2: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-1.656	(-3.947, .636)	-.103	-1.879	.062
For Profit	-1.051	-4.742, 2.640)	-.040	-.741	.460
Academic	.697	-2.470, 3.863)	.032	.572	.568
Most Wired™	.252	(-2.012, 2.517)	.016	.290	.772
Baldrige	-.234	(-7.917, 7.449)	-.004	-.079	.937
MAGNET™	3.540	(1.557, 5.523)	.265	4.643	.000
Safety Net	-6.501	(-8.202, -4.799)	-.548	-9.936	.000
Sole Provider	.130	(-2.747, 3.008)	.007	.118	.907

Table 69 – Domain 1, Region 2: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
76.464	HCAHPS© Score = 76.464 -1.656(Faith Based) – 1.051(For Profit) + .697(Academic) + .252(Most Wired™) - .234(Baldrige) + 3.540(MAGNET™) – 6.501 (Safety Net) + .130(Sole Provider)	.425	.402	.000

Table 70 – Domain 1, Regional 3: Means, Standard Deviations, and Intercorrelations, n = 294 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Nursing Communication Predictor Value	77.92	4.026	-.224	-.111	-.078	.069	.	.157	-.219	.156
1. Faith Based	.10	.294	-	-.142	-.031	.092	.	.030	.254	-.074
2. For Profit	.16	.367		-	-.029	-.184	.	-.128	-.053	.032
3. Academic	.06	.234			-	.093	.	.310	.100	-.085
4. Most Wired™	.30	.459				-	.	.234	-.108	-.079
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.354						-	-.093	-.079
7. Safety Net	.15	.357							-	.011
8. Sole Provider	.11	.308								-

Table 71 – Domain 1, Region 3: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-2.821	(-4.857, -.784)	-.206	-3.592	.000
For Profit	-1.406	(-3.000, .188)	-.128	-2.287	.023
Academic	-2.030	(-4.625, .565)	-.118	-2.029	.043
Most Wired™	.269	(-1.036, 1.574)	.031	.535	.593
MAGNET™	1.987	(.238, 3.736)	.175	2.946	.003
Safety Net	-1.624	(-3.309, .062)	-.144	-2.498	.013
Sole Provider	1.996	(.133, 3.859)	.153	2.778	.006

Table 72 – Domain 1, Region 3: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
78.190	HCAHPS© Score = 78.190 – 2.281(Faith Based) - 1.406(For Profit) – 2.030(Academic) +.269(Most Wired™) + 1.987(MAGNET™) – 1.624(Safety Net) + 1.996(Sole Provider)	.155	.134	.000

Table 73 – Domain 1, Region 4: Means, Standard Deviations, and Intercorrelations, n = 682

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Nursing Communication Predictor Value	78.68	4.844	.131	-.430	.024	-.141	.048	.045	.057	.129
1. Faith Based	.16	.369	-	-.278	-.045	-.032	.050	.084	-.096	-.090
2. For Profit	.31	.463		-	-.107	.184	-.036	-.170	.007	-.060
3. Academic	.02	.156			-	.066	-.009	.254	.009	-.056
4. Most Wired™	.19	.393				-	.043	.015	-.155	-.109
5. Baldrige	.00	.054					-	-.015	-.038	-.019
6. MAGNET™	.07	.253						-	-.116	-.058
7. Safety Net	.33	.469							-	.159
8. Sole Provider	.11	.311								-

Table 74 – Domain 1, Region 4: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.349	(-.883, 1.582)	.027	.732	.464
For Profit	-4.292	(-5.300, -3.284)	-.410	-10.996	.000
Academic	-.205	-3.095, 2.685)	-.007	-.183	.855
Most Wired™	-.612	(-1.750, .526)	-.050	-1.389	.165
Baldrige	3.344	(-4.646, 11.334)	.037	1.081	.280
MAGNET™	-.253	(-2.047, 1.540)	-.013	-.364	.716
Safety Net	.408	(-.541, 1.357)	.040	1.110	.268
Sole Provider	1.476	(.056, 2.895)	.095	2.686	.007

Table 75 – Domain 1, Region 4: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
79.787	HCAHPS© Score = 79.787 + .349(Faith Based) – 4.292(For Profit) - .205(Academic) - .612(Most Wired™) + 3.344(Baldrige) - .253(MAGNET™) + 408(Safety Net) + 1.476(Sole Provider)	.202	.193	.000

Table 76 – Domain 1, Region 5: Means, Standard Deviations, and Intercorrelations, n = 526

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Nursing Communication Predictor Value	79.67	4.221	-.030	-.102	-.077	.044	-.005	.042	-.343	.047
1. Faith Based	.28	.449	-	-.176	-.050	-.021	-.043	.008	-.050	-.081
2. For Profit	.07	.262		-	-.047	-.070	-.035	-.079	.101	-.075
3. Academic	.03	.161			-	.083	-.021	.193	-.015	-.058
4. Most Wired™	.17	.375				-	-.015	.247	-.048	-.027
5. Baldrige	.02	.123					-	.120	.011	-.043
6. MAGNET™	.15	.359						-	-.069	-.045
7. Safety Net	.10	.299							-	-.054
8. Sole Provider	.11	.311								-

Table 77 – Domain 1, Region 5: Regression Analysis

Variable	B	99% CI	β	t	p
Faith Based	-.606	(-1.626, .413)	-.065	-1.537	.125
For Profit	-1.279	(-3.033, .476)	-.079	-1.884	.060
Academic	-2.499	(-5.339, .341)	-.095	-2.275	.023
Most Wired™	.248	(-.985, 1.480)	.022	.520	.603
Baldrige	-.390	(-4.079, 3.300)	-.011	-.273	.785
MAGNET™	.325	(-.993, 1.644)	.028	.638	.524
Safety Net	-4.741	(-6.249, -3.232)	-.336	-8.126	.000
Sole Provider	.191	(-1.263, 1.645)	.014	.339	.735

Table 78 – Domain 1, Region 5: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
80.364	HCAHPS© Score = 80.364 – .606(Faith Based) – 1.279(For Profit) -2.499(Academic) + .248(Most Wired™) - .390(Baldrige) +.325(MAGNET™) – 4.741(Safety Net) +.191(Sole Provider)	.135	.122	.000

Table 79 – Domain 1, Region 6: Means, Standard Deviations, and Intercorrelations, n = 484 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Nursing Communication Predictor Value	78.59	5.106	.054	-.280	-.047	-.043	.	-.042	-.209	.083
1. Faith Based	.24	.429	-	-.333	-.069	.149	.	.219	-.185	-.140
2. For Profit	.28	.451		-	-.081	.052	.	-.056	.063	-.145
3. Academic	.03	.168			-	.157	.	.153	.105	-.087
4. Most Wired™	.13	.332				-	.	.250	.006	-.160
5. Baldrige	.00	.000					-			
6. MAGNET™	.07	.249						-	-.075	-.134
7. Safety Net	.35	.478							-	-.007
8. Sole Provider	.20	.402								-

Table 80 – Domain 1, Region 6: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.868	(-2.372, .637)	-.073	-1.491	.136
For Profit	-3.343	(-4.723, -1.964)	-.295	-6.267	.000
Academic	-1.404	(-4.929, 2.121)	-.046	-1.030	.303
Most Wired™	.113	(-1.693, 1.919)	.007	.162	.871
MAGNET™	-1.036	(-3.462, 1.389)	-.050	-1.105	.270
Safety Net	-2.166	(-3.377, -.955)	-.203	-4.627	.000
Sole Provider	.236	(1.238, 1.711)	.019	.415	.679

Table 81 – Domain 1, Region 6: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
80.559	HCAHPS© Score = 80.559 -.868(Faith Based) – 3.343(For Profit) – 1.404(Academic) +.113(Most Wired™) – 1.036(MAGNET™) – 2.166(Safety Net) +.236(Sole Provider)	.127	.114	.000

Table 82 – Domain 1, Region 7: Means, Standard Deviations, and Intercorrelations, n = 172

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Nursing Communication Predictor Value	78.92	3.990	.171	-.327	.004	-.003	.115	.050	-.217	-.001
1. Faith Based	.34	.474	-	-.280	-.002	-.058	.251	.052	-.046	-.161
2. For Profit	.13	.341		-	-.075	.188	-.087	-.016	.060	.027
3. Academic	.03	.184			-	.168	.108	.256	.054	-.117
4. Most Wired™	.17	.375				-	.048	.059	.081	-.102
5. Baldrige	.05	.211					-	.019	.030	-.073
6. MAGNET™	.10	.299						-	-.102	-.116
7. Safety Net	.09	.283							-	-.051
8. Sole Provider	.27	.447								-

Table 83 – Domain 1, Region 7: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.520	(-1.190, 2.230)	.062	.792	.430
For Profit	-3.606	(-5.932, -1.279)	-.308	-4.039	.000
Academic	-.758	(-5.068, 3.552)	-.035	-.459	.647
Most Wired™	.818	(-1.251, 2.887)	.077	1.031	.304
Baldrige	1.508	(-2.164, 5.181)	.080	1.070	.286
MAGNET™	.362	(-2.245, 2.968)	.027	.362	.718
Safety Net	-2.797	(-5.468, -.126)	-.198	-2.730	.007
Sole Provider	.175	(-1.541, 1.891)	.020	.266	.790

Table 84 – Domain 1, Region 7: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
79.210	HCAHPS© Score = 79.210 +.520(Faith Based) – 3.606(For Profit) -.758(Academic) +.818(Most Wired™) + 1.508(Baldrige) +.362(MAGNET™) – 2.797(Safety Net) +.175(Sole Provider)	.165	.124	.000

Table 85 – Domain 1, Region 8: Means, Standard Deviations, and Intercorrelations, n = 121

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Nursing Communication Predictor Value	77.33	7.828	.048	-.122	.020	.082	.020	.035	-.560	.108
1. Faith Based	.21	.412	-	-.210	-.048	-.146	-.048	.115	-.130	-.094
2. For Profit	.20	.400		-	-.045	.233	-.045	-.085	-.123	-.153
3. Academic	.01	.091			-	-.063	-.008	.289	-.023	-.068
4. Most Wired™	.32	.469				-	-.063	-.034	-.095	-.216
5. Baldrige	.01	.091					-	.289	-.023	-.068
6. MAGNET™	.09	.289						-	-.078	-.235
7. Safety Net	.06	.234							-	-.036
8. Sole Provider	.36	.481								-

Table 86 – Domain 1, Region 8: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-1.009	(-5.024, 3.006)	-.053	-.659	.512
For Profit	-4.199	(8.349, -.049)	-.215	-2.651	.009
Academic	.550	(-17.451, 18.551)	.006	.080	.936
Most Wired™	1.395	(-2.129, 4.918)	.084	1.037	.302
Baldrige	.550	(-17.451, 18.551)	.006	.080	.936
MAGNET™	-.237	(-6.342, 5.867)	-.009	-.102	.919
Safety Net	-19.480	(-26.310, -12.650)	-.583	-7.474	.000
Sole Provider	1.077	(-2.413, 4.567)	.066	.808	.421

Table 87 – Domain 1, Region 8: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
78.687	HCAHPS© Score = 78.687 – 1.009(Faith Based) – 4.199(For Profit) +.550(Academic) +1.395(Most Wired™) +.550(Baldrige) - .237(MAGNET™) – 19.480(Safety Net) + 1.077(Sole Provider)	.364	.319	.000

Table 88 – Domain 1, Region 9: Means, Standard Deviations, and Intercorrelations, n = 364

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Nursing Communication Predictor Value	74.24	5.109	.011	-.305	.005	.113	.184	.196	-.421	.098
1. Faith Based	.18	.381	-	-.265	-.092	-.118	-.055	-.038	-.009	-.060
2. For Profit	.25	.432		-	-.115	-.121	-.068	-.175	.191	-.079
3. Academic	.04	.193			-	.082	-.024	.195	.152	-.060
4. Most Wired™	.20	.397				-	.121	.098	-.207	-.148
5. Baldrige	.01	.117					-	.133	-.018	-.035
6. MAGNET™	.09	.280						-	-.056	-.091
7. Safety Net	.48	.500							-	-.147
8. Sole Provider	.08	.275								-

Table 89 – Domain 1, Region 9: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.446	(-2.126, 1.234)	-.033	-.687	.493
For Profit	-2.471	(-3.999, -.942)	-.209	-4.186	.000
Academic	.489	(-2.793, 3.770)	.018	.386	.700
Most Wired™	-.250	(-1.863, 1.363)	-.019	-.401	.689
Baldrige	6.556	(1.318, 11.795)	.150	3.241	.001
MAGNET™	2.183	(-.067, 4.433)	.119	2.513	.012
Safety Net	-3.812	(-5.097, -2.526)	-.373	-7.677	.000
Sole Provider	.718	(-1.551, 2.988)	.039	.820	.413

Table 90 – Domain 1, Region 9: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
76.445	HCAHPS© Score = 76.445 - .446(Faith Based) - 2.471(For Profit) + .489(Academic) - .250(Most Wired™) + 6.556(Baldrige) + 2.183(MAGNET™) – 3.812(Safety Net) + .718(Sole Provider)	.273	.257	.000

Table 91 – Domain 1, Region 10: Means, Standard Deviations, and Intercorrelations, n = 107

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Nursing Communication Predictor Value	76.98	4.148	-.026	-.076	.071	-.213	-.047	.091	-.118	.064
1. Faith Based	.31	.464	-	-.270	-.065	-.139	-.065	.016	-.159	-.069
2. For Profit	.14	.349		-	-.039	.083	-.039	-.122	.041	-.028
3. Academic	.01	.097			-	-.038	-.009	.321	-.033	-.042
4. Most Wired™	.13	.339				-	-.038	-.018	.051	-.017
5. Baldrige	.01	.097					-	.321	.287	-.042
6. MAGNET™	.08	.279						-	.008	-.132
7. Safety Net	.10	.305							-	-.063
8. Sole Provider	.16	.367								-

Table 92 – Domain 1, Region 10: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.806	(-3.235, 1.623)	-.090	-.872	.386
For Profit	-.792	(-3.967, 2.383)	-.067	-.655	.514
Academic	.852	(-10.817, 12.520)	.020	.192	.848
Most Wired™	-2.621	(-5.779, .537)	-.214	-2.180	.032
Baldrige	-2.843	(-15.040, 9.353)	-.066	-.612	.542
MAGNET™	1.546	(-2.778, 5.870)	.104	.939	.350
Safety Net	-1.305	(-4.981, 2.371)	-.096	-.932	.353
Sole Provider	.653	(-2.266, 3.572)	.058	.588	.558

Table 93 – Domain 1, Region 10: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
77.603	HCAHPS© Score = 77.603 -.806(Faith Based) -.792(For Profit) + .852(Academic) – 2.621(Most Wired™) – 2.843(Baldrige) +1.546(MAGNET™) – 1.305(Safety Net) +.653(Sole Provider)	.082	.007	.374

APPENIDIX J – MULTIPLE REGRESSION ANALYSIS, DOMAIN 2 – DOCTOR COMUNICATION

Table 94 – Domain 2, All Variables: Means, Standard Deviations, and Intercorrelations, N = 3089

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Doctor Communication Predictor Value	80.54	4.645	.001	-.119	-.034	-.067	.002	-.020	-.063	.127
1. Faith Based	.20	.402	-	-.237	-.063	-.030	.031	.053	-.080	-.078
2. For Profit	.20	.399		-	-.080	.036	-.047	-.133	.102	-.062
3. Academic	.03	.180			-	.094	.002	.203	.062	-.074
4. Most Wired™	.19	.391				-	.017	.147	-.103	-.098
5. Baldrige	.01	.093					-	.080	-.014	-.027
6. MAGNET™	.11	.309						-	-.103	-.098
7. Safety Net	.25	.433							-	-.019
8. Sole Provider	.14	.344								-

Table 95 – Domain 2, All Variables: Regression Analysis Summary for Hospital Characteristics Predicting HCAHPS© Scores for All Characteristics

Variable	B	99% CI	β	t	p
Faith Based	-.287	(-.836, .262)	-.025	-1.350	.177
For Profit	-1.335	(-1.892, -.778)	-.115	-6.174	.000
Academic	-.629	(-1.845, .587)	-.024	-1.333	.183
Most Wired™	-.647	(-1.202, -.092)	-.054	-3.004	.003
Baldrige	.080	(-2.202, 2.366)	.002	.091	.928
MAGNET™	-.246	(-.965, .474)	-.016	-.879	.379
Safety Net	-.608	(-1.107, -.109)	-.057	-3.138	.002
Sole Provider	1.468	(.841, 2.095)	.109	6.030	.000

Table 96 – Domain 2, All Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
80.985	HCAHPS© Score = 80.985 -.287(Faith Based) – 1.335(For Profit) -.629(Academic) - .647(Most Wired™) + .080(Baldrige) - .246(MAGNET™) - .608(Safety Net) +1.468(Sole Provider)	.036	.033	.000

Table 97 – Domain 2, Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3089

Variable	*M*	*SD*	1	2	3
Doctor Communication Predictor Value	80.54	4.645	-.067	.002	-.020
1. Most Wired™	.19	.391	-	.017	.147
2. Baldrige	.01	.093		-	.080
3. MAGNET™	.11	.309			-

Table 98 – Domain 2, Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Most Wired™	-.781	(-1.338, -.225)	-.066	-3.621	.000
Baldrige	.187	(-2.130, 2.504)	.004	.208	.835
MAGNET™	-.161	(-.867, .545)	-.011	-.587	.558

Table 99 – Domain 2, Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
80.705	HCAHPS© Score = 80.705 - .781(Most Wired™) + .187(Baldrige) - .161(MAGNET™)	.005	.004	.002

Table 100 – Domain 2, Non-Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3089

Variable	*M*	*SD*	1	2	3	4	5
Doctor Communication Predictor Value	80.54	4.645	-.119	-.034	-.063	.127	-.119
1. Faith Based	.20	.402	-	-.237	-.063	-.080	-.078
2. For Profit	.20	.399		-	-.080	.102	-.062
3. Academic	.03	.180			-	.062	-.074
4. Safety Net	.25	.433				-	-.019
5. Sole Provider	.14	.344					-

Table 101 – Domain 2, Non-Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.273	(-/922, .276)	-.024	-1.280	.200
Fort Profit	-1.343	(-1.896, -.789)	-.115	-6.249	.000
Academic	-.846	(-2.036, .345)	-.033	-1.831	.067
Safety Net	-.521	(-1.016, -.027)	-.049	-2.717	.007
Sole Provider	1.555	(.982, 2.179)	.115	6.432	.000

Table 102 – Domain 2, Non-Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
80.810	HCAHPS© Score = 80.810 -.273(Faith Based) = 1.343(For Profit) = .846(Academic) -.521(Safety Net) +1.555(Sole Provider)	.033	.031	.000

Table 103 – Domain 2, Response Rate Low: Means, Standard Deviations, and Intercorrelations, n = 122 (No Baldrige coded 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Doctor Communication Predictor Value	76.73	5.932	.038	.008	.047	.041	.	-.005	-.048	.257
1. Faith Based	.12	.330	-	-.204	-.092	.015	.	-.048	-.044	.085
2. For Profit	.23	.422		-	-.135	-.135	.	-.070	-.082	-.154
3. Academic	.06	.234			-	-.061	.	-.032	.081	-.070
4. Most Wired™	.06	.234				-	.	-.032	.081	-.070
5. Baldrige	.00	.000					-			
6. MAGNET™	.02	.128						-	.043	-.036
7. Safety Net	.90	.299							-	.093
8. Sole Provider	.07	.262								-

Table 104 – Domain 2, Response Rate Low: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.623	(-3.739, 4.986)	.035	.374	.709
For Profit	1.103	(-2.410, 4.617)	.079	.823	.412
Academic	2.371	(-3.763, 8.506)	.093	1.013	.313
Most Wired™	2.140	(-3.953, 8.232)	.084	.920	.360
MAGNET™	1.014	(-9.994, 12.022)	.022	.241	.810
Safety Net	-1.626	(-6.352, 3.100)	-.082	-.901	.369
Sole Provider	6.487	(1.034, 11.940)	.287	3.116	.002

Table 105 – Domain 2, Response Rate Low: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
77.112	HCAHPS© Score = 77.112 + .623(Faith Based) +1.103(For Profit) + 2.371(Academic) + 2.140(Most Wired™) + 1.014(MAGNET™) - 1.626(Safety Net) + 6.487(Sole Provider)	.087	.031	.154

Table 106 – Domain 2, Response Rate Medium: Means, Standard Deviations, and Intercorrelations, n = 1531

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Doctor Communication Predictor Value	79.95	4.801	-.009	-.177	-.022	-.067	-.002	.003	.002	.156
1. Faith Based	.20	.398	-	-.231	-.069	-.003	.012	.084	-.069	-.112
2. For Profit	.20	.401		-	-.102	.021	-.045	-.139	.091	-.037
3. Academic	.05	.209			-	.118	-.019	.242	.032	-.084
4. Most Wired™	.19	.391				-	-.005	.163	-.099	-.111
5. Baldrige	.01	.088					-	.042	-.015	-.034
6. MAGNET™	.10	.306						-	-.105	-.099
7. Safety Net	.33	.471							-	-.006
8. Sole Provider	.13	.335								-

Table 107 – Domain 2, Response Rate Medium: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.454	(-1.264, .356)	-.038	-1.445	.149
For Profit	-2.192	(-2.999, -1.385)	-.183	-7.007	.000
Academic	-.666	(-2.213, .881)	-.029	-1.110	.267
Most Wired™	-.553	(-1.361, .255)	-.045	-1.764	.078
Baldrige	-.330	(-3.832, 3.173)	-.006	-.243	.808
MAGNET™	.165	(-.901, 1.232)	.011	.400	.689
Safety Net	.145	(-.520, .809)	.014	.561	.575
Sole Provider	1.981	(1.041, 2.921)	.138	5.437	.000

Table 108 – Domain 2, Response Rate Medium: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
80.291	HCAHPS© Score = 80.291 -.454(Faith Based) -2.192(For Profit) -.666(Academic) -.553(Most Wired™) -.330(Baldrige) +.165(MAGNET™) +.145(Safety Net) + 1.981(Sole Provider)	.058	.053	.000

Table 109 – Domain 2, Response Rate High: Means, Standard Deviations, and Intercorrelations, n = 1436

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Doctor Communication Predictor Value	81.50	4.042	-.016	-.063	-.025	-.115	-.006	-.082	.106	.068
1. Faith Based	.21	.411	-	-.244	-.047	-.064	.046	.021	-.070	-.059
2. For Profit	.19	.396		-	-.042	.064	-.051	-.130	.149	-.080
3. Academic	.02	.136			-	.085	.036	.189	.052	-.058
4. Most Wired™	.20	.399				-	.035	.129	-.081	-.093
5. Baldrige	.01	.102					-	.112	.009	-.024
6. MAGNET™	.12	.322						-	-.070	-.105
7. Safety Net	.11	.309							-	.006
8. Sole Provider	.15	.358								-

Table 110 – Domain 2, Response Rate High: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.320	(-1.006, .366)	-.033	-1.203	.229
For Profit	-.880	(-1.605, -.156)	-.086	-3.134	.002
Academic	-.379	(-2.425, 1.667)	-.013	-.478	.633
Most Wired™	-.902	(-1.597, -.208)	-.089	-3.352	.001
Baldrige	.092	(-2.594, 2.779)	.002	.089	.929
MAGNET™	-.848	(-1.729, .033)	-.067	-2.482	.013
Safety Net	1.378	(.482, 2.274)	.105	3.968	.000
Sole Provider	.477	(-.292, 1.247)	.042	1.600	.110

Table 111 – Domain 2, Response Rate High: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
81.809	HCAHPS© Score = 81.809 -.320(Faith Based) -.880(For Profit) -.379(Academic) - .902(Most Wired™) + .092(Baldrige) - .848(MAGNET™) + 1.378(Safety Net) + .477(Sole Provider)	.036	.031	.000

Table 112– Domain 2: Region 1: Means, Standard Deviations, and Intercorrelations, n = 131 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Doctor Communication Predictor Value	80.53	3.049	.037	-.256	.081	-.074	.	.077	-.035	.016
1. Faith Based	.11	.310	-	-.009	-.082	-.134	.	.068	-.054	-.099
2. For Profit	.15	.361		-	-.101	.063	.	-.175	.101	-.042
3. Academic	.05	.226			-	.027	.	.095	.119	-.068
4. Most Wired™	.24	.427				-	.	.128	-.153	-.092
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.353						-	-.087	-.037
7. Safety Net	.12	.329							-	-.107
8. Sole Provider	.08	.267								-

Table 113 – Domain 2: Region 1: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.273	(-2.017, 2.564)	.028	.312	.755
For Profit	-2.003	(-3.979, -.028)	-.237	-2.654	.009
Academic	.825	(-2.312, 3.962)	.061	.688	.493
Most Wired™	-.462	(-2.156, 1.231)	-.065	-.714	.477
MAGNET™	.299	(-1.727, 2.325)	.035	.387	.700
Safety Net	-.213	(-2.401, 1.975)	-.023	-.255	.799
Sole Provider	.062	(-2.591, 2.716)	.005	.062	.951

Table 114 – Domain 2: Region 1: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
80.854	HCAHPS© Score = .273(Faith Based) – 2.003(For Profit) + .825(Academic) - .462(Most Wired™) +.299(MAGNET™) - .213 (Safety Net) + .062(Sole Provider)	.075	.023	.200

Table 115 – Domain 2, Region 2: Means, Standard Deviations, and Intercorrelations, n = 208

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Doctor Communication Predictor Value	77.06	3.175	-.190	.086	.052	.159	.014	.304	-.235	.023
1. Faith Based	.13	.332	-	-.080	-.098	-.026	-.037	.032	-.041	-.109
2. For Profit	.04	.204		-	-.055	-.017	-.021	-.046	.026	-.061
3. Academic	.06	.243			-	.183	-.025	.072	.061	-.075
4. Most Wired™	.14	.347				-	-.040	.254	-.096	-.012
5. Baldrige	.01	.098					-	.075	-.061	-.028
6. MAGNET™	.20	.399						-	-.146	-.143
7. Safety Net	.28	.450							-	-.099
8. Sole Provider	.08	.267								-

Table 116 – Domain 2, Region 2: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-1.857	(-3.480, -.233)	-.194	-2.974	.003
For Profit	1.422	(-1.194, 4.037)	.091	1.414	.159
Academic	.267	(-1.977, 2.511)	.020	.309	.757
Most Wired™	.577	(-1.028, 2.181)	.063	.935	.351
Baldrige	-.661	(-6.106, 4.783)	-.020	-.316	.752
MAGNET™	2.176	(.771, 3.581)	.273	4.028	.000
Safety Net	-1.402	(-2.608, -.197)	-.199	-3.025	.003
Sole Provider	.342	(-1.697, 2.381)	.029	.437	.663

Table 117 – Domain 2, Region 2: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
77.073	HCAHPS© Score = 77.073 -1.857(Faith Based) +1.422(For Profit) +.267(Academic) +.577(Most Wired™) - .661(Baldrige) + 2.176(MAGNET™) – 1.402(Safety Net) + .342(Sole Provider)	.186	.153	.000

Table 118 – Domain 2, Region 3: Means, Standard Deviations, and Intercorrelations, n = 294 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Doctor Communication Predictor Value	79.77	3.585	-.131	.020	-.037	-.072	.	.013	.014	.230
1. Faith Based	.10	.294	-	-.142	-.031	.092	.	.030	.254	-.074
2. For Profit	.16	.367		-	-.029	-.184	.	-.128	-.053	.032
3. Academic	.06	.234			-	.093	.	.310	.100	-.085
4. Most Wired™	.30	.459				-	.	.234	-.108	-.079
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.354						-	-.093	-.079
7. Safety Net	.15	.357							-	.011
8. Sole Provider	.11	.308								-

Table 119 – Domain 2, Region 3: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-1.543	(-3.442, .356)	-.127	-2.107	.036
For Profit	-.040	(-1.526, 1.447)	-.004	-.069	.945
Academic	-.646	(-3.066, 1.773)	-.042	-.693	.489
Most Wired™	-.387	(-1.603, .830)	-.049	-.824	.411
MAGNET™	.637	(-.994, 2.268)	.063	1.012	.312
Safety Net	.481	(-1.091, 2.053)	.048	.794	.428
Sole Provider	2.532	(.794, 4.269)	.217	3.778	.000

Table 120 – Domain 2, Region 3: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
79.643	HCAHPS© Score = 79.643 – 1.543(Faith Based) - .040(For Profit) - .646(Academic) - .387(Most Wired™) + .637(MAGNET™) + .481(Safety Net) + 2.532(Sole Provider)	.073	.050	.003

Table 121 – Domain 2, Region 4: Means, Standard Deviations, and Intercorrelations, n = 682

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Doctor Communication Predictor Value	82.00	4.923	.004	-.278	-.015	-.199	.017	-.030	.216	.147
1. Faith Based	.16	.369	-	-.278	-.045	-.032	.050	.084	-.096	-.090
2. For Profit	.31	.463		-	-.107	.184	-.036	-.170	.007	-.060
3. Academic	.02	.156			-	.066	-.009	.254	.009	-.056
4. Most Wired™	.19	.393				-	.043	.015	-.155	-.109
5. Baldrige	.00	.054					-	-.015	-.038	-.019
6. MAGNET™	.07	.253						-	-.116	-.058
7. Safety Net	.33	.469							-	.159
8. Sole Provider	.11	.311								-

Table 122 – Domain 2, Region 4: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.681	(-1.973, .610)	-.051	-1.363	.173
For Profit	-2.939	(-3.996, -1.882)	-.276	-7.182	.000
Academic	-.855	(-3.884, 2.175)	-.027	-.729	.466
Most Wired™	-1.399	(-2.592, -.206)	-.112	-3.029	.003
Baldrige	1.939	(-6.437, 10.314)	.021	.598	.550
MAGNET™	-.734	(-2.614, 1.146)	-.038	-1.008	.314
Safety Net	1.876	(.881, 2.871)	.179	4.870	.000
Sole Provider	1.301	(-.187, 2.789)	.082	2.259	.024

Table 123 – Domain 2, Region 4: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
82.601	HCAHPS© Score = 82.601 - .681(Faith Based) – 2.939(For Profit) - .855(Academic) – 1.399(Most Wired™) + 1.939(Baldrige) - .734(MAGNET™) + 1.876(Safety Net) + 1.301(Sole Provider)	.151	.141	.000

Table 124 – Domain 2, Region 5: Means, Standard Deviations, and Intercorrelations, n = 526

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Doctor Communication Predictor Value	80.60	3.529	-.044	-.031	-.071	.026	-.003	-.013	-.179	.061
1. Faith Based	.28	.449	-	-.176	-.050	-.021	-.043	.008	-.050	-.081
2. For Profit	.07	.262		-	-.047	-.070	-.035	-.079	.101	-.075
3. Academic	.03	.161			-	.083	-.021	.193	-.015	-.058
4. Most Wired™	.17	.375				-	-.015	.247	-.048	-.027
5. Baldrige	.02	.123					-	.120	.011	-.043
6. MAGNET™	.15	.359						-	-.069	-.045
7. Safety Net	.10	.299							-	-.054
8. Sole Provider	.11	.311								-

Table 125 – Domain 2, Region 5: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.446	(-1.342, .450)	-.057	-1.287	.199
For Profit	-.315	(-1.857, 1.228)	-.023	-.528	.598
Academic	-1.638	(-4.134, .858)	-.075	-1.697	.090
Most Wired™	.244	(-.839, 1.328)	.026	.583	.560
Baldrige	-.060	(-3.303, 3.183)	-.002	-.048	.962
MAGNET™	-.163	(-1.322, .996)	-.017	-.363	.717
Safety Net	-2.104	(-3.430, -.778)	-.178	-4.102	.000
Sole Provider	.459	(-.819, 1.737)	.040	.928	.354

Table 126 – Domain 2, Region 5: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
80.929	HCAHPS© Score = 80.929 - .446(Faith Based) - .315(For Profit) – 1.638(Academic) + .244(Most Wired™) - .060 Baldrige - .163(MAGNET™) – 2.104(Safety Net) + .459(Sole Provider)	.044	.029	.003

Region 6 table (all variables)

Table 127 – Domain 2, Region 6: Means, Standard Deviations, and Intercorrelations, n = 484 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Doctor Communication Predictor Value	82.81	4.772	-.041	-.158	-.065	-.158	.	-.085	-.119	.122
1. Faith Based	.24	.429	-	-.333	-.069	.149	.	.219	-.185	-.140
2. For Profit	.28	.451		-	-.081	.052	.	-.056	.063	-.145
3. Academic	.03	.168			-	.157	.	.153	.105	-.087
4. Most Wired™	.13	.332				-	.	.250	.006	-.160
5. Baldrige	.00	.000					-			
6. MAGNET™	.07	.249						-	-.075	-.134
7. Safety Net	.35	.478							-	-.007
8. Sole Provider	.20	.402								-

Table 128 – Domain 2, Region 6: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-1.015	(-2.461, .431)	-.091	-1.815	.070
For Profit	-1.835	(-3.161, -.509)	-.173	-3.578	.000
Academic	-1.266	(-4.654, 2.122)	-.045	-.966	.334
Most Wired™	-1.558	(-3.294, .178)	-.108	-2.322	.021
MAGNET™	-.822	(-3.154, 1.509)	-.043	-.912	.362
Safety Net	-1.220	(-2.384, -.056)	-.122	-2.711	.007
Sole Provider	.663	(-.754, 2.080)	.056	1.209	.227

Table 129 – Domain 2, Region 6: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
84.157	HCAHPS© Score = 84.157 – 1.015(Faith Based) – 1.835(For Profit) – 1.266(Academic) – 1.558(Most Wired™) - .822(MAGNET™) – 1.220(Safety Net) + .663(Sole Provider)	.076	.063	.000

Table 130 – Domain 2, Region 7: Means, Standard Deviations, and Intercorrelations, n = 172

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Doctor Communication Predictor Value	81.46	3.708	.064	-.169	-.101	-.178	-.050	-.099	.006	.012
1. Faith Based	.34	.474	-	-.280	-.002	-.058	.251	.052	-.046	-.161
2. For Profit	.13	.341		-	-.075	.188	-.087	-.016	.060	.027
3. Academic	.03	.184			-	.168	.108	.256	.054	-.117
4. Most Wired™	.17	.375				-	.048	.059	.081	-.102
5. Baldrige	.05	.211					-	.019	.030	-.073
6. MAGNET™	.10	.299						-	-.102	-.116
7. Safety Net	.09	.283							-	-.051
8. Sole Provider	.27	.447								-

Table 131 – Domain 2, Region 7: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.258	(-1.421, 1.937)	.033	.400	.689
For Profit	-1.596	(-3.881, .688)	-.147	-1.821	.070
Academic	-1.336	(-5.567, 2.896)	-.066	-.823	.412
Most Wired™	-1.313	(-3.344, .718)	-.133	-1.684	.094
Baldrige	-1.008	(-4.614, 2.598)	-.057	-.728	.467
MAGNET™	-.943	(-3.502, 1.616)	-.076	-.960	.338
Safety Net	.317	(-2.306, 2.939)	.024	.315	.753
Sole Provider	-.097	(-1.782, 1.588)	-.012	-.150	.881

Table 132 – Domain 2, Region 7: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
81.993	HCAHPS© Score = 81.993 +.258(Faith Based) - 1.596(For Profit) -1.336(Academic) – 1.313(Most Wired™) – 1.008(Baldrige) - .943(MAGNET™) +.317(Safety Net) - .097(Sole Provider)	.068	.022	.168

Table 133 – Domain 2, Region 8: Means, Standard Deviations, and Intercorrelations, n = 121

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Doctor Communication Predictor Value	79.99	5.319	.043	-.050	-.017	.125	-.017	-.054	-.534	.174
1. Faith Based	.21	.412	-	-.210	-.048	-.146	-.048	.115	-.130	-.094
2. For Profit	.20	.400		-	-.045	.233	-.045	-.085	-.123	-.153
3. Academic	.01	.091			-	-.063	-.008	.289	-.023	-.068
4. Most Wired™	.32	.469				-	-.063	-.034	-.095	-.216
5. Baldrige	.01	.091					-	.289	-.023	-.068
6. MAGNET™	.09	.289						-	-.078	-.235
7. Safety Net	.06	.234							-	-.036
8. Sole Provider	.36	.481								-

Table 134 – Domain 2, Region 8: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.189	(-2.969, 2.591)	-.015	-.178	.859
For Profit	-1.779	(-4.653, 1.094)	-.134	-1.623	.107
Academic	.105	(-12.359, 12.569)	.002	.022	.982
Most Wired™	1.493	(.-.947, 3.933)	.132	1.604	.112
Baldrige	.105	(-12.359, 12.569)	.002	.022	.982
MAGNET™	-1.259	(-5.486, 2.968)	-.068	-.781	.437
Safety Net	-12.256	(-16.985, (-7.526)	-.540	-6.791	.000
Sole Provider	1.608	(-.808, 4.025)	.145	1.744	.084

Table 135 – Domain 2, Region 8: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
80.154	HCAHPS© Score = 80.154 - .189(Faith Based) – 1.779(For Profit) + .105(Academic) + 1.493 (Most Wired™) + .105(Baldrige) – 1.259(MAGNET™) – 12.256(Safety Net) + 1.608(Sole Provider)	.340	.293	.000

Table 136 – Domain 2, Region 9: Means, Standard Deviations, and Intercorrelations, n = 364

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Doctor Communication Predictor Value	77.42	4.681	.009	-.357	.040	.143	.106	.103	-.320	.080
1. Faith Based	.18	.381	-	-.265	-.092	-.118	-.055	-.038	-.009	-.060
2. For Profit	.25	.432		-	-.115	-.121	-.068	-.175	.191	-.079
3. Academic	.04	.193			-	.082	-.024	.195	.152	-.060
4. Most Wired™	.20	.397				-	.121	.098	-.207	-.148
5. Baldrige	.01	.117					-	.133	-.018	-.035
6. MAGNET™	.09	.280						-	-.056	-.091
7. Safety Net	.48	.500							-	-.147
8. Sole Provider	.08	.275								-

Table 137 – Domain 2, Region 9: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.738	(-2.345, .869)	-.060	-1.189	.235
For Profit	-3.315	(-4.777, -1.853)	-.306	-5.871	.000
Academic	.858	(-2.282, 3.997)	.035	.708	.480
Most Wired™	.430	(-1.113, 1.973)	.036	.722	.471
Baldrige	2.898	(-2.113, 7.909)	.072	1.498	.135
MAGNET™	.261	(-1.891, 2.413)	.016	.314	.754
Safety Net	-2.377	(-3.607, -1.147)	-.254	-5.005	.000
Sole Provider	.447	(-1.724, 2.618)	.026	.533	.594

Table 138 – Domain 2, Region 9: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
79.290	HCAHPS© Score = 79.290 - .738(Faith Based) – 3.315(For Profit) +.858(Academic) + .430(Most Wired™) + 2.898(Baldrige) + .261(MAGNET™) - 2.377(Safety Net) + .447(Sole Provider)	.208	.190	.000

Table 139 – Domain 2, Region 10: Means, Standard Deviations, and Intercorrelations, n = 107

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Doctor Communication Predictor Value	79.40	3.499	-.042	-.054	.045	-.180	-.011	.062	-.110	-.050
1. Faith Based	.31	.464	-	-.270	-.065	-.139	-.065	.016	-.159	-.069
2. For Profit	.14	.349		-	-.039	.083	-.039	-.122	.041	-.028
3. Academic	.01	.097			-	-.038	-.009	.321	-.033	-.042
4. Most Wired™	.13	.339				-	-.038	-.018	.051	-.017
5. Baldrige	.01	.097					-	.321	.287	-.042
6. MAGNET™	.08	.279						-	.008	-.132
7. Safety Net	.10	.305							-	-.063
8. Sole Provider	.16	.367								-

Table 140 – Domain 2, Region 10: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.814	(-2.887, 1.259)	-.108	-1.032	.305
For Profit	-.599	(-3.308, 2.111)	-.060	-.580	.563
Academic	.236	(-9.722, 10.194)	.007	.062	.951
Most Wired™	-1.907	(-4.602, .788)	-.185	-1.859	.066
Baldrige	-.436	(-10.844, 9.972)	-.012	-.110	.913
MAGNET™	.593	(-3.097, 4.283)	.047	.422	.674
Safety Net	-1.328	(-4.465, 1.809)	-.116	-1.112	.269
Sole Provider	-.607	(-3.098, 1.884)	-.064	-.640	.524

Table 141 – Domain 2, Region 10: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
80.171	HCAHPS© Score = 80.171 - .814(Faith Based) - .599(For Profit) +.236(Academic) – 1.907(Most Wired™) – 436(Baldrige) + .593(MAGNET™) – 1.328(Safety Net) - .607(Sole Provider)	.060	-.016	.616

APPENIDIX K – MULTIPLE REGRESSION ANALYSIS, DOMAIN 3 –

RESPONSIVENESS OF STAFF

Table 142 – Domain 3, All Variables: Means, Standard Deviations, and Intercorrelations, N = 3089

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Responsiveness of Hospital Staff Predictor Value	65.29	7.669	-.022	-.183	-.081	-.054	.029	-.009	-.206	.168
1. Faith Based	.20	.402	-	-.237	-.063	-.030	.031	.053	-.080	-.078
2. For Profit	.20	.399		-	-.080	.036	-.047	-.133	.102	-.062
3. Academic	.03	.180			-	.094	.002	.203	.062	-.074
4. Most Wired™	.19	.391				-	.017	.147	-.103	-.098
5. Baldrige	.01	.093					-	.080	-.014	-.027
6. MAGNET™	.11	.309						-	-.103	-.098
7. Safety Net	.25	.433							-	-.019
8. Sole Provider	.14	.344								-

Table 143 – Domain 3, All Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-1.408	(-2.281, -.535)	-.074	-4.157	.000
For Profit	-3.393	(-4.279, -2.507)	-.177	-9.869	.000
Academic	-2.958	(-4.892, -1.025)	-.070	-3.943	.000
Most Wired™	-.937	(-1.820, -.055)	-.048	-2.737	.006
Baldrige	2.168	(-1.465, 5.802)	.026	1.538	.124
MAGNET™	-.404	(-1.549, .740)	-.016	-.910	.363
Safety Net	-3.426	(-4.221, -2.632)	-.193	-11.121	.000
Sole Provider	3.054	(2.056, 4.051)	.137	7.889	.000

Table 144 – Domain 3, All Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
66.991	HCAHPS© Score = 66.991 – 1.408(Faith Based) – 3.393(For Profit) – 2.958(Academic) - .937(Most Wired™) +2.168(Baldrige) - .404(MAGNET™) – 3.426(Safety Net) + 3.054(Sole Provider)	.106	.104	.000

Table 145 – Domain 3, Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3089

Variable	*M*	*SD*	1	2	3
Responsiveness of Hospital Staff Predictor Value	65.29	7.669	-.054	.029	-.009
1. Most Wired™	.19	.391	-	.017	.147
2. Baldrige	.01	.093		-	.080
3. MAGNET™	.11	.309			-

Table 146 – Domain 3, Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Baldrige	-1.055	(-1.974, -.136)	-.054	-2.959	.003
MAGNET™	2.494	(-1.333, 6.322)	.030	1.680	.093
Most Wired™	-.095	(-1.261, 1.071)	-.004	-.209	.834

Table 147 – Domain 3, Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
65.481	HCAHPS© Score = 65.481 – 1.055(Baldrige) +2.494(MAGNET™) - .095(Most Wired™)	.004	.003	.008

Table 148 – Domain 3, Non-Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3089

Variable	*M*	*SD*	1	2	3	4	5
Responsiveness of Hospital Staff Predictor Value	65.29	7.669	-.022	-.183	-.081	-.206	.168
1. Faith Based	.20	.402	-	-.237	-.063	-.080	-.078
2. For Profit	.20	.399		-	-.080	.102	-.062
3. Academic	.03	.180			-	.062	-.074
4. Safety Net	.25	.433				-	-.019
5. Sole Provider	.14	.344					-

Table 149 – Domain 3, Non-Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-1.380	(-2.253, -.506)	-.072	-4.071	.000
For Profit	-3.421	(-4.301, -2.540)	-.178	-10.014	.000
Academic	-3.291	(-5.184, -1.398)	-.077	-4.480	.000
Safety Net	-3.301	(-4.087, -2.515)	-.186	-10.820	.000
Sole Provider	3.168	(2.177, 4.159)	.142	8.238	.000

Table 150 – Domain 3, Non-Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
66.755	HCAHPS© Score = 66.755 – 1.380(Faith Based) – 3.421(For Profit) – 3.291(Academic) – 3.301(Safety Net) +3.168(Sole Provider)	.103	.101	.000

Table 151 – Domain 3, Response Rate Low: Means, Standard Deviations, and Intercorrelations , n = 122 (No Baldrige coded 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Responsiveness of Hospital Staff Predictor Value	56.87	9.657	.080	.091	-.077	.062	.	.029	-.182	.310
1. Faith Based	.12	.330	-	-.204	-.092	.015	.	-.048	-.044	.085
2. For Profit	.23	.422		-	-.135	-.135	.	-.070	-.082	-.154
3. Academic	.06	.234			-	-.061	.	-.032	.081	-.070
4. Most Wired™	.06	.234				-	.	-.032	.081	-.070
5. Baldrige	.00	.000					-			
6. MAGNET™	.02	.128						-	.043	-.036
7. Safety Net	.90	.299							-	.093
8. Sole Provider	.07	.262								-

Table 152 – Domain 3, Response Rate Low: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	2.236	(-4.489, 8.961)	.076	.871	.386
For Profit	3.828	(-1.589, 9.244)	.167	1.851	.067
Academic	.201	(-9.256, 9.658)	.005	.056	.956
Most Wired™	5.310	(-4.082, 14.702)	.128	1.481	.141
MAGNET™	5.344	(-11.626, 22.313)	.071	.825	.411
Safety Net	-6.862	(-14.148, .424)	-.212	-2.467	.015
Sole Provider	13.291	(4.885, 21.698)	.361	4.142	.000

Table 153 – Domain 3, Response Rate Low: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
60.518	HCAHPS© Score = 60.518 + 2.236(Faith Based) + 3.828(For Profit) + .201(Academic) + 5.310(Most Wired™) + 5.344(MAGNET™) – 6.862(Safety Net) + 13.291(Sole Provider)	.182	.131	.001

Table 154 – Domain 3, Response Rate Medium: Means, Standard Deviations, and Intercorrelations, n = 1531

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Responsiveness of Hospital Staff Predictor Value	64.04	7.470	-.018	-.239	-.050	-.055	.026	.003	-.140	.178
1. Faith Based	.20	.398	-	-.231	-.069	-.003	.012	.084	-.069	-.112
2. For Profit	.20	.401		-	-.102	.021	-.045	-.139	.091	-.037
3. Academic	.05	.209			-	.118	-.019	.242	.032	-.084
4. Most Wired™	.19	.391				-	-.005	.163	-.099	-.111
5. Baldrige	.01	.088					-	.042	-.015	-.034
6. MAGNET™	.10	.306						-	-.105	-.099
7. Safety Net	.33	.471							-	-.006
8. Sole Provider	.13	.335								-

Table 155 – Domain 3, Response Rate Medium: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-1.306	(-2.531, -.080)	-.070	-2.748	.006
For Profit	-4.527	(-5.748, -3.306)	-.243	-9.564	.000
Academic	-2.044	(-4.384, .297)	-.057	-2.252	.024
Most Wired™	-.719	(-1.942, .504)	-.038	-1.516	.130
Baldrige	1.565	(-3.735, 6.865)	.018	.762	.446
MAGNET™	-.094	(-1.708, 1.520)	-.004	-.150	.881
Safety Net	-1.969	(-2.974, .963)	-.124	-5.049	.000
Sole Provider	3.384	(1.962, 4.805)	.152	6.137	.000

Table 156 – Domain 3, Response Rate Medium: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
65.647	HCAHPS© Score = 65.647 – 1.306(Faith Based) – 4.527(For Profit) – 2.044(Academic) - .719(Most Wired™) + 1.565(Baldrige) - .094(MAGNET™) – 1.969(Safety Net) + 3.384(Sole Provider)	.109	.104	.000

Table 157 – Domain 3, Response Rate High: Means, Standard Deviations, and Intercorrelations, n = 1436

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Responsiveness of Hospital Staff Predictor Value	67.35	6.875	-.070	-.162	-.085	-.110	.022	-.066	-.015	.133
1. Faith Based	.21	.411	-	-.244	-.047	-.064	.046	.021	-.070	-.059
2. For Profit	.19	.396		-	-.042	.064	-.051	-.130	.149	-.080
3. Academic	.02	.136			-	.085	.036	.189	.052	-.058
4. Most Wired™	.20	.399				-	.035	.129	-.081	-.093
5. Baldrige	.01	.102					-	.112	.009	-.024
6. MAGNET™	.12	.322						-	-.070	-.105
7. Safety Net	.11	.309							-	.006
8. Sole Provider	.15	.358								-

Table 158 – Domain 3, Response Rate High: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-2.006	(-3.151, -.860)	-.120	-4.516	.000
For Profit	-3.243	(-4.453, -2.034)	-.187	-6.916	.000
Academic	-3.834	(-7.250, -.419)	-.076	-2.895	.004
Most Wired™	-1.468	(-2.627, -.309)	-.085	-3.267	.001
Baldrige	2.171	(-2.314, 6.656)	.032	1.248	.212
MAGNET™	-1.211	(-2.683, .260)	-.057	-2.124	.034
Safety Net	-.072	(-1.568, 1.423)	-.003	-.125	.901
Sole Provider	1.787	(.502, 3.072)	.093	3.587	.000

Table 159 – Domain 3, Response Rate High: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
68.632	HCAHPS© Score = 68.632 – 2.006(Faith Based) – 3.243(For Profit) – 3.834(Academic) – 1.468(Most Wired™) + 2.171(Baldrige) – 1.211(MAGNET™) - .072(Safety Net) + 1.787(Sole Provider)	.071	.066	.000

Table 160 – Domain 3, Region 1: Means, Standard Deviations, and Intercorrelations, n = 131 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Responsiveness of Hospital Staff Predictor Value	66.17	6.192	-.065	-.342	-.084	-.062	.	.133	-.056	.160
1. Faith Based	.11	.310	-	-.009	-.082	-.134	.	.068	-.054	-.099
2. For Profit	.15	.361		-	-.101	.063	.	-.175	.101	-.042
3. Academic	.05	.226			-	.027	.	.095	.119	-.068
4. Most Wired™	.24	.427				-	.	.128	-.153	-.092
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.353						-	-.087	-.037
7. Safety Net	.12	.329							-	-.107
8. Sole Provider	.08	.267								-

Table 161 – Domain 3, Region 1: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-1.584	(-6.003, 2.836)	-.079	-.937	.350
For Profit	-5.637	(-9.448, -1.826)	-.329	-3.870	.000
Academic	-3.381	(-9.434, 2.672)	-.123	-1.461	.146
Most Wired™	-.711	(-3.978, 2.557)	-.049	-.569	.570
MAGNET™	1.819	(-2.090, 5.728)	.104	1.217	.226
Safety Net	.066	(-4.155, 4.288)	.004	.041	.967
Sole Provider	3.008	(-2.112, 8.128)	.129	1.537	.127

Table 162 – Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
67.045	HCAHPS© Score = 67.045 – 1.584(Faith Based) – 5.637(For Profit) – 3.381(Academic) - .711(Most Wired™) + 1.819(MAGNET™) + .066(Safety Net) + 3.008(Sole Provider)	.165	.118	.002

Table 163 – Domain 3, Region 2: Means, Standard Deviations, and Intercorrelations, n = 208

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Responsiveness of Hospital Staff Predictor Value	60.29	7.666	-.140	.041	.013	.099	.067	.231	-.499	.140
1. Faith Based	.13	.332	-	-.080	-.098	-.026	-.037	.032	-.041	-.109
2. For Profit	.04	.204		-	-.055	-.017	-.021	-.046	.026	-.061
3. Academic	.06	.243			-	.183	-.025	.072	.061	-.075
4. Most Wired™	.14	.347				-	-.040	.254	-.096	-.012
5. Baldrige	.01	.098					-	.075	-.061	-.028
6. MAGNET™	.20	.399						-	-.146	-.143
7. Safety Net	.28	.450							-	-.099
8. Sole Provider	.08	.267								-

Table 164 – Domain 3, Region 2: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-3.340	(-6.932, .253)	-.144	-2.418	.017
For Profit	2.212	(-3.575, 8.000)	.059	.994	.321
Academic	.837	(-4.129, 5.803)	.026	.438	.662
Most Wired™	.064	(-3.487, 3.615)	.003	.047	.963
Baldrige	1.926	(-10.121, 13.972)	.025	.416	.678
MAGNET™	3.471	(.362, 6.580)	.181	2.904	.004
Safety Net	-7.998	(-10.666, -5.330)	-.469	-7.796	.000
Sole Provider	3.153	(-1.359, 7.665)	.110	1.817	.071

Table 165 – Domain 3, Region 2: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
61.839	HCAHPS© Score = 61.839 – 3.340(Faith Based) + 2.212(For Profit) + .837(Academic) + .064(Most Wired™) + 1.926(Baldrige) + 3.471(MAGNET™) – 7.998(Safety Net) + 3.153(Sole Provider)	.316	.289	.000

Table 166 – Domain 3, Region 3: Means, Standard Deviations, and Intercorrelations, n = 294 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Responsiveness of Hospital Staff Predictor Value	64.38	6.764	-.155	-.070	-.191	-.027	.	-.035	-.149	.246
1. Faith Based	.10	.294	-	-.142	-.031	.092	.	.030	.254	-.074
2. For Profit	.16	.367		-	-.029	-.184	.	-.128	-.053	.032
3. Academic	.06	.234			-	.093	.	.310	.100	-.085
4. Most Wired™	.30	.459				-	.	.234	-.108	-.079
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.354						-	-.093	-.079
7. Safety Net	.15	.357							-	.011
8. Sole Provider	.11	.308								-

Table 167 – Domain 3, Region 3: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-3.017	(-6.484, .449)	-.131	-2.257	.025
For Profit	-1.960	(-4.674, .754)	-.106	-1.873	.062
Academic	-5.004	(-9.421, -.587)	-.173	-2.938	.004
Most Wired™	-.245	(-2.466, 1.976)	-.017	-.286	.775
MAGNET™	.408	(-2.569, 3.386)	.021	.356	.722
Safety Net	-2.015	(-4.885, .854)	-.106	-1.821	.070
Sole Provider	4.992	(1.820, 8.164)	.227	4.082	.000

Table 167 – Domain 3, Region 3: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
65.056	HCAHPS© Score = 65.056 – 3.017(Faith Based) – 1.960(For Profit) – 5.004(Academic) - .245(Most Wired™) + .408(MAGNET™) – 2.015(Safety Net) + 4.992(Sole Provider)	.132	.111	.000

Table 168 – Domain 3, Region 4: Means, Standard Deviations, and Intercorrelations, n = 682

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Responsiveness of Hospital Staff Predictor Value	65.68	7.406	.080	-.313	-.050	-.137	.032	-.029	.069	.115
1. Faith Based	.16	.369	-	-.278	-.045	-.032	.050	.084	-.096	-.090
2. For Profit	.31	.463		-	-.107	.184	-.036	-.170	.007	-.060
3. Academic	.02	.156			-	.066	-.009	.254	.009	-.056
4. Most Wired™	.19	.393				-	.043	.015	-.155	-.109
5. Baldrige	.00	.054					-	-.015	-.038	-.019
6. MAGNET™	.07	.253						-	-.116	-.058
7. Safety Net	.33	.469							-	.159
8. Sole Provider	.11	.311								-

Table 169 – Domain 3, Region 4: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.061	(-1.914, 2.036)	.003	.079	.937
For Profit	-4.988	(-6.604, -3.372)	-.312	-7.973	.000
Academic	-2.910	(-7.541, 1.722)	-.061	-1.623	.105
Most Wired™	-1.137	(-2.962, .687)	-.060	-1.611	.108
Baldrige	3.361	(-9.445, 16.166)	.025	.678	.498
MAGNET™	-1.625	(-4.499, 1.250)	-.056	-1.460	.145
Safety Net	.701	(-.820, 2.222)	.044	1.190	.234
Sole Provider	1.828	(-.447, 4.103)	.077	2.075	.038

Table 170 – Domain 3, Region 4: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
67.178	HCAHPS© Score = 67.178 + .061(Faith Based) – 4.988(For Profit) – 2.910(Academic) – 1.137(Most Wired™) + 3.361(Baldrige) – 1.625(MAGNET™) + .701(Safety Net) + 1.828(Sole Provider)	.123	.113	.000

Table 171 – Domain 3, Region 5: Means, Standard Deviations, and Intercorrelations, n = 526

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Responsiveness of Hospital Staff Predictor Value	67.71	6.889	-.076	-.102	-.094	-.019	-.013	-.057	-.322	.169
1. Faith Based	.28	.449	-	-.176	-.050	-.021	-.043	.008	-.050	-.081
2. For Profit	.07	.262		-	-.047	-.070	-.035	-.079	.101	-.075
3. Academic	.03	.161			-	.083	-.021	.193	-.015	-.058
4. Most Wired™	.17	.375				-	-.015	.247	-.048	-.027
5. Baldrige	.02	.123					-	.120	.011	-.043
6. MAGNET™	.15	.359						-	-.069	-.045
7. Safety Net	.10	.299							-	-.054
8. Sole Provider	.11	.311								-

Table 172 – Domain 3, Region 5: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-1.568	(-3.214, .079)	-.102	-2.462	.014
For Profit	-2.323	(-5.157, .511)	-.088	-2.119	.035
Academic	-3.783	(-8.370, .804)	-.088	-2.132	.033
Most Wired™	-.326	(-2.316, 1.665)	-.018	-.423	.673
Baldrige	-.359	(-6.318, 5.600)	-.006	-.156	.876
MAGNET™	-1.105	(-3.235, 1.025)	-.058	-1.341	.180
Safety Net	-7.317	(-9.753, -4.881)	-.317	-7.765	.000
Sole Provider	2.852	(.504, 5.201)	.129	3.140	.002

Table 173 – Domain 3, Region 5: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
69.063	HCAHPS© Score = 69.063 – 1.568(Faith Based) – 2.323(For Profit) – 3.783(Academic) - .326(Most Wired™) - .359(Baldrige) – 1.105(MAGNET™) – 7.317(Safety Net) + 2.852(Sole Provider)	.153	.140	.000

Table 174 – Domain 3, Region 6: Means, Standard Deviations, and Intercorrelations, n = 484 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Responsiveness of Hospital Staff Predictor Value	67.22	7.962	-.042	-.248	-.112	-.139	.	-.120	-.203	.161
1. Faith Based	.24	.429	-	-.333	-.069	.149	.	.219	-.185	-.140
2. For Profit	.28	.451		-	-.081	.052	.	-.056	.063	-.145
3. Academic	.03	.168			-	.157	.	.153	.105	-.087
4. Most Wired™	.13	.332				-	.	.250	.006	-.160
5. Baldrige	.00	.000					-			
6. MAGNET™	.07	.249						-	-.075	-.134
7. Safety Net	.35	.478							-	-.007
8. Sole Provider	.20	.402								-

Table 175 – Domain 3, Region 6: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-2.705	(-5.009, -.401)	-.146	-3.037	.003
For Profit	-4.987	(-7.100, -2.874)	-.282	-6.103	.000
Academic	-4.543	(-9.942, .855)	-.096	-2.176	.030
Most Wired™	-1.310	(-4.075, 1.456)	-.055	-1.225	.221
MAGNET™	-2.636	(-6.351, 1.078)	-.082	-1.836	.067
Safety Net	-3.454	(-5.309, -1.600)	-.208	-4.817	.000
Sole Provider	1.376	(-.882, 3.633)	.069	1.576	.116

Table 176 – Domain 3, Region 6: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
70.699	HCAHPS© Score = 70.699 – 2.705(Faith Based) – 4.987(For Profit) – 4.543(Academic) – 1.310(Most Wired™) – 2.636(MAGNET™) – 3.454(Safety Net) + 1.376(Sole Provider)	.158	.145	.000

Table 177 – Domain 3, Region 7: Means, Standard Deviations, and Intercorrelations, n = 172

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Responsiveness of Hospital Staff Predictor Value	66.02	6.367	-.078	-.122	-.075	-.121	.008	-.096	-.037	.085
1. Faith Based	.34	.474	-	-.280	-.002	-.058	.251	.052	-.046	-.161
2. For Profit	.13	.341		-	-.075	.188	-.087	-.016	.060	.027
3. Academic	.03	.184			-	.168	.108	.256	.054	-.117
4. Most Wired™	.17	.375				-	.048	.059	.081	-.102
5. Baldrige	.05	.211					-	.019	.030	-.073
6. MAGNET™	.10	.299						-	-.102	-.116
7. Safety Net	.09	.283							-	-.051
8. Sole Provider	.27	.447								-

Table 178 – Domain 3, Region 7: Regression Analysis

Variable	B	99% CI	β	t	p
Faith Based	-1.647	(-4.553, 1.258)	-.123	-1.478	.141
For Profit	-2.641	(-6.595, 1.312)	-.142	-1.741	.084
Academic	-1.765	(-9.089, 5.558)	-.051	-.628	.531
Most Wired™	-1.416	(-4.931, 2.099)	-.083	-1.050	.295
Baldrige	1.265	(-4.976, 7.505)	.042	.528	.598
MAGNET™	-1.538	(-5.967, 2.890)	-.072	-.905	.367
Safety Net	-.685	(-5.223, 3.854)	-.030	-.393	.695
Sole Provider	.676	(-2.240, 3.591)	.047	.604	.547

Table 179 – Domain 3, Region 7: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
67.195	HCAHPS© Score = 67.195 – 1.647(Faith Based) – 2.641(For Profit) – 1.765(Academic) – 1.416(Most Wired™) + 1.265(Baldrige) – 1.538(MAGNET™) - .685(Safety Net) + .676(Sole Provider)	.053	.007	.337

Table 180 – Domain 3, Region 8: Means, Standard Deviations, and Intercorrelations, n = 121

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Responsiveness of Hospital Staff Predictor Value	67.21	8.273	-.101	-.095	-.036	.004	.020	-.025	-.436	.160
1. Faith Based	.21	.412	-	-.210	-.048	-.146	-.048	.115	-.130	-.094
2. For Profit	.20	.400		-	-.045	.233	-.045	-.085	-.123	-.153
3. Academic	.01	.091			-	-.063	-.008	.289	-.023	-.068
4. Most Wired™	.32	.469				-	-.063	-.034	-.095	-.216
5. Baldrige	.01	.091					-	.289	-.023	-.068
6. MAGNET™	.09	.289						-	-.078	-.235
7. Safety Net	.06	.234							-	-.036
8. Sole Provider	.36	.481								-

Table 181 – Domain 3, Region 8: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-3.944	(-8.508, .620)	-.197	-2.265	.025
For Profit	-3.821	(-8.538, .896)	-.185	-2.123	.036
Academic	-4.811	(-25.272, 15.649)	-.053	-.616	.539
Most Wired™	-.235	(-4.240, 3.770)	-.013	-.154	.878
Baldrige	.189	(-20.272, 20.649)	.002	.024	.981
MAGNET™	-.654	(-7.592, 6.285)	-.023	-.247	.805
Safety Net	-17.128	(-24.892, -9.365)	-.485	-5.781	.000
Sole Provider	1.438	(-2.528, 5.405)	.084	.950	.344

Table 182 – Domain 3, Region 8: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
69.465	HCAHPS© Score = 69.465 – 3.944(Faith Based) – 3.821(For Profit) – 4.811(Academic) - .235(Most Wired™) + .189(Baldrige) - .654(MAGNET™) – 17.128(Safety Net) + 1.438(Sole Provider)	.265	.212	.000

Table 183 – Domain 3, Region 9: Means, Standard Deviations, and Intercorrelations, n = 364

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Responsiveness of Hospital Staff Predictor Value	61.03	7.492	-.121	-.239	-.005	.094	.164	.130	-.343	.155
1. Faith Based	.18	.381	-	-.265	-.092	-.118	-.055	-.038	-.009	-.060
2. For Profit	.25	.432		-	-.115	-.121	-.068	-.175	.191	-.079
3. Academic	.04	.193			-	.082	-.024	.195	.152	-.060
4. Most Wired™	.20	.397				-	.121	.098	-.207	-.148
5. Baldrige	.01	.117					-	.133	-.018	-.035
6. MAGNET™	.09	.280						-	-.056	-.091
7. Safety Net	.48	.500							-	-.147
8. Sole Provider	.08	.275								-

Table 184 – Domain 3, Region 9: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-3.205	(-5.773, -.637)	-.163	-3.233	.001
For Profit	-3.487	(-5.823, -1.150)	-.201	-3.865	.000
Academic	-.051	(-5.067, 4.964)	-.001	-.027	.979
Most Wired™	-.335	(-2.800, 2.130)	-.018	-.352	.725
Baldrige	8.512	(.505, 16.518)	.132	2.753	.006
MAGNET™	1.769	(-1.670, 5.207)	.066	1.332	.184
Safety Net	-4.343	(-6308, -2.378)	-.290	-5.723	.000
Sole Provider	2.580	(-.889, 6.049)	.095	1.926	.055

Table 185 – Domain 3, Region 9: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
64.119	HCAHPS© Score = 64.119 – 3.205(Faith Based) – 3.487(For Profit) + .051(Academic) - .335(Most Wired™) +8.512(Baldrige) + 1.769(MAGNET™) – 4.343(Safety Net) + 2.580(Sole Provider)	.211	.193	.000

Table 186 – Domain 3, Region 10: Means, Standard Deviations, and Intercorrelations, n = 107

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Responsiveness of Hospital Staff Predictor Value	64.60	6.818	-.142	-.036	.020	-.218	-.009	-.007	.011	.146
1. Faith Based	.31	.464	-	-.270	-.065	-.139	-.065	.016	-.159	-.069
2. For Profit	.14	.349		-	-.039	.083	-.039	-.122	.041	-.028
3. Academic	.01	.097			-	-.038	-.009	.321	-.033	-.042
4. Most Wired™	.13	.339				-	-.038	-.018	.051	-.017
5. Baldrige	.01	.097					-	.321	.287	-.042
6. MAGNET™	.08	.279						-	.008	-.132
7. Safety Net	.10	.305							-	-.063
8. Sole Provider	.16	.367								-

Table 187 – Domain 3, Region 10: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-2.699	(-6.653, 1.256)	-.184	-1.793	.076
For Profit	-1.216	(-6.385, 3.953)	-.062	-.618	.538
Academic	-.127	(-19.123, 18.869)	-.002	-.018	.986
Most Wired™	-4.790	(-9.932, .351)	-.238	-2.448	.016
Baldrige	-2.446	(-22.302, 17.409)	-.035	-.324	.747
MAGNET™	.314	(-6.725, 7.354)	.013	.117	.907
Safety Net	.320	(-5.665, 6.304)	.014	.140	.889
Sole Provider	2.393	(-2.359, 7.145)	.129	1.323	.189

Table 188 – Domain 3, Region 10: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
65.812	HCAHPS© Score = 65.812 – 2.699(Faith Based) – 1.216(For Profit) - .127(Academic) – 4.790(Most Wired™) – 2.446(Baldrige) + .314(MAGNET™) + .320(Safety Net) + 2.393(Sole Provider)	.099	.026	.227

APPENIDIX L – MULTIPLE REGRESSION ANALYSIS, DOMAIN 4 – PAIN CONTROL

Table 189 – Domain 4, All Variables: Means, Standard Deviations, and Intercorrelations, N = 3087

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Pain Control	70.00	5.115	.031	-.158	-.025	.004	.046	.068	-.210	.068
Predictor Value										
1. Faith Based	.20	.402	-	-.237	-.063	-.030	.031	.053	-.080	-.079
2. For Profit	.20	.399		-	-.080	.036	-.047	-.133	.102	-.062
3. Academic	.03	.180			-	.094	.002	.203	.062	-.074
4. Most Wired™	.19	.391				-	.017	.147	-.104	-.098
5. Baldrige	.01	.093					-	.080	-.014	-.027
6. MAGNET™	.11	.309						-	-.103	-.098
7. Safety Net	.25	.433							-	-.019
8. Sole Provider	.14	.344								-

Table 190 – Domain 4, All Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.211	(-.805, .383)	-.017	-.915	.360
For Profit	-1.710	(-2.313, -1.107)	-.134	-7.311	.000
Academic	-.792	(-2.107, .524)	-.028	-1.551	.121
Most Wired™	-.131	(-.732, .469)	-.010	-.562	.574
Baldrige	1.996	(-.477, 4.468)	.036	2.081	.038
MAGNET™	.688	(-.091, 1.467)	.042	2.277	.023
Safety Net	-2.253	(-2.793, -1.712)	-.191	-10.744	.000
Sole Provider	.846	(.167, 1.525)	.057	3.211	.001

Table 191 – Domain 4, All Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
70.788	HCAHPS© Score = 70.788 - .211(Faith Based) – 1.710(For Profit) - .792(Academic) - .131(Most Wired™) +1.996(Baldrige) +.688(MAGNET™) – 2.253(Safety Net) + .846(Sole Provider)	.070	.067	.000

Table 192 – Domain 4, Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3087

Variable	*M*	*SD*	1	2	3
Pain Control	70.00	5.115	.004	.046	.068
Predictor Value					
1. Most Wired™	.19	.391	-	.017	.147
2. Baldrige	.01	.093		-	.080
3. MAGNET™	.11	.309			-

Table 193 – Domain 4, Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Most Wired™	-.084	(-.696, .528)	-.006	-.353	.724
Baldrige	2.260	(-.290, 4.809)	.041	2.284	.022
MAGNET™	1.091	(.314, 1.867)	.066	3.620	.000

Table 194 – Domain 4, Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
69.876	HCAHPS© Score = 69.876 - .084(Most Wired™) + 2.260(Baldrige) +1.091(MAGNET™)	.006	.005	.000

Table 195 – Domain 4, Non-Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3087

Variable	*M*	*SD*	1	2	3	4	5
Pain Control Predictor Value	70.00	5.115	.031	-.158	-.025	-.210	.068
1. Faith Based	.20	.402	-	-.237	-.063	-.080	-.079
2. For Profit	.20	.399		-	-.080	.102	-.062
3. Academic	.03	.180			-	.062	-.074
4. Safety Net	.25	.433				-	-.019
5. Sole Provider	.14	.344					-

Table 196 – Domain 4, Non-Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.186	(-.780, .408)	-.015	-.808	.419
Fort Profit	-1.793	(-2.392, -1.194)	-.140	-7.714	.000
Academic	-.591	(-1.879, .697)	-.021	-1.183	.237
Safety Net	-2.293	(-2.828, -1.758)	-.194	-11.049	.000
Sole Provider	.788	(.114, 1.462)	.053	3.012	.003

Table 197 – Domain 4, Non-Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
70.877	HCAHPS© Score = 70.877 - .186(Faith Based) – 1.793(For Profit) - .591(Academic) – 2.293(Safety Net) + .788(Sole Provider)	.066	.065	.000

Table 198 – Domain 4, Response Rate Low: Means, Standard Deviations, and Intercorrelations, n = 122 (No Baldrige coded 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Pain Control Predictor Value	63.54	7.011	-.015	.075	.047	.087	.	.027	.006	.221
1. Faith Based	.12	.330	-	-.204	-.092	.015	.	-.048	-.044	.085
2. For Profit	.23	.422		-	-.135	-.135	.	-.070	-.082	-.154
3. Academic	.06	.234			-	-.061	.	-.032	.081	-.070
4. Most Wired™	.06	.234				-	.	-.032	.081	-.070
5. Baldrige	.00	.000					-			
6. MAGNET™	.02	.128						-	.043	-.036
7. Safety Net	.90	.299							-	.093
8. Sole Provider	.07	.262								-

Table 199 – Domain 4, Response Rate Low: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.035	(-5.123, 5.192)	.002	.018	.986
For Profit	2.474	(-1.680, 6.628)	.149	1.560	.121
Academic	2.924	(-4.328, 10.177)	.097	1.056	.293
Most Wired™	4.062	(-3.140, 11.264)	.135	1.478	.142
MAGNET™	3.067	(-9.946, 16.081)	.056	.617	.538
Safety Net	-.654	(-6.241, 4.934)	-.028	-.306	.760
Sole Provider	7.060	(.613, 13.506)	.264	2.869	.005

Table 200 – Domain 4, Response Rate Low: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
62.586	HCAHPS© Score = 62.586 + .035(Faith Based) + 2.474(For Profit) + 2.924(Academic) + 4.062(Most Wired™) + 3.067(MAGNET™) - .654(Safety Net) + 7.060(Sole Provider)	.087	.031	.157

Response Rate medium table (all variables)

Table 201 – Domain 4, Response Rate Medium: Means, Standard Deviations, and Intercorrelations, n = 1531

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Pain Control Predictor Value	69.38	5.208	.062	-.213	-.002	.015	.036	.079	-.143	.082
1. Faith Based	.20	.398	-	-.231	-.069	-.003	.012	.084	-.069	-.112
2. For Profit	.20	.401		-	-.102	.021	-.045	-.139	.091	-.037
3. Academic	.05	.209			-	.118	-.019	.242	.032	-.084
4. Most Wired™	.19	.391				-	-.005	.163	-.099	-.111
5. Baldrige	.01	.088					-	.042	-.015	-.034
6. MAGNET™	.10	.306						-	-.105	-.099
7. Safety Net	.33	.471							-	-.006
8. Sole Provider	.13	.335								-

Table 202 – Domain 4, Response Rate Medium: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.172	(-.701, 1.045)	.013	.508	.612
For Profit	-2.485	(-3.355, -1.616)	-.191	-7.372	.000
Academic	-.576	(-2.243, 1.092)	-.023	-.890	.373
Most Wired™	.156	(-.716, 1.027)	.012	.461	.645
Baldrige	1.538	(-2.237, 5.313)	.026	1.051	.294
MAGNET™	.855	(-.294, 2.005)	.050	1.919	.055
Safety Net	-1.286	(-2.003, -.570)	-.116	-4.632	.000
Sole Provider	1.260	(.248, 2.273)	.081	3.210	.001

Table 203 – Domain 4, Response Rate Medium: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
70.001	HCAHPS© Score = 70.001 + .172(Faith Based) – 2.485(For Profit) - .576(Academic) + .156(Most Wired™) + 1.538(Baldrige) + .855(MAGNET™) – 1.286(Safety Net) + 1.260(Sole Provider)	.070	.065	.000

Table 204 – Domain 4, Response Rate High: Means, Standard Deviations, and Intercorrelations, n = 1434

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Pain Control Predictor Value	71.21	4.219	-.034	-.130	-.025	-.067	.052	.023	-.031	.009
1. Faith Based	.21	.411	-	-.245	-.047	-.065	.046	.021	-.071	-.060
2. For Profit	.20	.397		-	-.042	.063	-.051	-.130	.149	-.080
3. Academic	.02	.136			-	.085	.036	.189	.052	-.058
4. Most Wired™	.20	.399				-	.035	.128	-.082	-.093
5. Baldrige	.01	.102					-	.112	.009	-.024
6. MAGNET™	.12	.322						-	-.070	-.105
7. Safety Net	.11	.309							-	.005
8. Sole Provider	.15	.358								-

Table 205 – Domain 4, Response Rate High: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.814	(-1.533, -.095)	-.079	-2.921	.004
For Profit	-1.491	(-2.250, -.732)	-.140	-5.065	.000
Academic	-1.029	(-3.172, 1.114)	-.033	-1.239	.216
Most Wired™	-.703	(-1.431, .024)	-.067	-2.494	.013
Baldrige	2.084	(-.730, 4.899)	.050	1.910	.056
MAGNET™	.170	(-.753, 1.093)	.013	.475	.635
Safety Net	-.260	(-1.198, .679)	-.019	-.713	.476
Sole Provider	-.152	(-.958, .655)	-.013	-.485	.628

Table 206 – Domain 4, Response Rate High: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
71.843	HCAHPS© Score = 71.843 - .814(Faith Based) – 1.491(For Profit) – 1.029(Academic) - .703(Most Wired™) + 2.084(Baldrige) + .170(MAGNET™) - .260(Safety Net) - .152(Sole Provider)	.030	.024	.000

Table 207 – Domain 4, Region 1: Means, Standard Deviations, and Intercorrelations, n = 118 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Pain Control	70.99	3.438	-.040	-.295	.043	-.023	.	.160	-.079	.030
Predictor Value										
1. Faith Based	.10	.304	-	.022	-.084	-.111	.	.031	-.051	-.091
2. For Profit	.14	.353		-	-.103	-.043	.	-.162	.119	-.015
3. Academic	.06	.237			-	.040	.	.110	.110	-.068
4. Most Wired™	.22	.416				-	.	.148	-.151	-.062
5. Baldrige	.00	.000					-			
6. MAGNET™	.14	.344						-	-.085	-.008
7. Safety Net	.14	.344							-	-.107
8. Sole Provider	.07	.252								-

Table 208 – Domain 4, Region 1: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.518	(-3.245, 2.210)	-.046	-.497	.620
For Profit	-2.637	(-4.997, -.277)	-.271	-2.929	.004
Academic	.087	(-3.419, 3.594)	.006	.065	.948
Most Wired™	-.528	(-2.545, 1.489)	-.064	-.686	.494
MAGNET™	1.224	(-1.212, 3.661)	.122	1.317	.191
Safety Net	-.470	(-2.920, 1.981)	-.047	-.503	.616
Sole Provider	.198	(-3.072, 3.468)	.015	.159	.874

Table 209 – Domain 4, Region 1: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
71.420	HCAHPS© Score = 71.420 - .518(Faith Based) – 2.637(For Profit) + .087(Academic) - .528(Most Wired™) + 1.224(MAGNET™) - .470(Safety Net) + .198(Sole Provider)	.107	.050	.079

Table 210 – Domain 4, Region 2: Means, Standard Deviations, and Intercorrelations, n = 208

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Pain Control Predictor Value	51.51	5.742	-.171	.113	.001	.034	.017	.175	-.017	-.010
1. Faith Based	.13	.332	-	-.080	-.098	-.026	-.037	.032	-.041	-.109
2. For Profit	.04	.204		-	-.055	-.017	-.021	-.046	.026	-.061
3. Academic	.06	.243			-	.183	-.025	.072	.061	-.075
4. Most Wired™	.14	.347				-	-.040	.254	-.096	-.012
5. Baldrige	.01	.098					-	.075	-.061	-.028
6. MAGNET™	.20	.399						-	-.146	-.143
7. Safety Net	.28	.450							-	-.099
8. Sole Provider	.08	.267								-

Table 211 – Domain 4, Region 2: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-2.954	(-6.084, .177)	-.171	-2.454	.015
For Profit	3.005	(-2.039, 8.048)	.107	1.549	.123
Academic	-.495	(-4.823, 3.832)	-.021	-.298	.766
Most Wired™	-.216	(-3.311, 2.878)	-.013	-.182	.856
Baldrige	-.136	(-10.634, 10.361)	-.002	-.034	.973
MAGNET™	2.751	(.042, 5.461)	.191	2.641	.009
Safety Net	.026	(-2.300, 2.351)	.002	.029	.977
Sole Provider	.076	(-3.856, 4.007)	.004	.050	.960

Table 212 – Domain 4, Region 2: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
51.261	HCAHPS© Score = 51.261 – 2.954(Faith Based) + 3.005(For Profit) - .495(Academic) - .216(Most Wired™) - .136(Baldrige) + 2.751(MAGNET™) +.026(Safety Net) + .076(Sole Provider)	.074	.037	.049

Table 213 – Domain 4, Region 3: Means, Standard Deviations, and Intercorrelations, n= 294 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Pain Control Predictor Value	69.24	3.945	-.147	.001	-.086	.020	.	.096	-.242	.077
1. Faith Based	.10	.294	-	-.142	-.031	.092	.	.030	.254	-.074
2. For Profit	.16	.367		-	-.029	-.184	.	-.128	-.053	.032
3. Academic	.06	.234			-	.093	.	.310	.100	-.085
4. Most Wired™	.30	.459				-	.	.234	-.108	-.079
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.354						-	-.093	-.079
7. Safety Net	.15	.357							-	.011
8. Sole Provider	.11	.308								-

Table 214 – Domain 4, Region 3: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-1.328	(-3.401, .745)	-.099	-1.661	.098
For Profit	-.160	(-1.783, 1.463)	-.015	-.255	.799
Academic	-1.666	(-4.308, .976)	-.099	-1.636	.103
Most Wired™	-.067	(-1.395, 1.261)	-.008	-.131	.896
MAGNET™	1.308	(-.473, 3.088)	.117	1.905	.058
Safety Net	-2.187	(-3.903, -.471)	-.198	-3.305	.001
Sole Provider	.933	(-.964, 2.830)	.073	1.276	.203

Table 215 – Domain 4, Region 3: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
69.551	HCAHPS© Score = 69.551 – 1.328(Faith Based) - .160(For Profit) – 1.666(Academic) - .067(Most Wired™) + 1.308(MAGNET™) – 2.187(Safety Net) + .933(Sole Provider)	.088	.065	.000

Table 216 – Domain 4, Region 4: Means, Standard Deviations, and Intercorrelations, n = 682

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Pain Control Predictor Value	70.36	5.338	.071	-.297	.001	-.074	.047	.056	-.019	.090
1. Faith Based	.16	.369	-	-.278	-.045	-.032	.050	.084	-.096	-.090
2. For Profit	.31	.463		-	-.107	.184	-.036	-.170	.007	-.060
3. Academic	.02	.156			-	.066	-.009	.254	.009	-.056
4. Most Wired™	.19	.393				-	.043	.015	-.155	-.109
5. Baldrige	.00	.054					-	-.015	-.038	-.019
6. MAGNET™	.07	.253						-	-.116	-.058
7. Safety Net	.33	.469							-	.159
8. Sole Provider	.11	.311								-

Table 217 – Domain 4, Region 4: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.166	(-1.611, 1278)	-.012	-.297	.766
For Profit	-3.361	(-4.543, -2.179)	-.291	-7.344	.000
Academic	-.982	(-4.370, 2.407)	-.029	-.748	.454
Most Wired™	-.225	(-1.560, 1.109)	-.017	-.436	.663
Baldrige	3.768	(-5.560, 13.136)	.038	1.039	.299
MAGNET™	.360	(-1.743, 2.463)	.017	.442	.659
Safety Net	-.324	(-1.437, .789)	-.028	-.752	.452
Sole Provider	1.279	(-.385, 2.944)	.075	1.986	.047

Table 218 – Domain 4, Region 4: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
71.428	HCAHPS© Score = 71.428 - .166(Faith Based) – 3.361(For Profit) - .982(Academic) - .225(Most Wired™) + 3.768(Baldrige) + .360(MAGNET™) - .324(Safety Net) + 1.279(Sole Provider)	.097	.086	.000

Table 219 – Domain 4, Region 5: Means, Standard Deviations, and Intercorrelations, n = 525

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Pain Control Predictor Value	70.97	3.932	-.050	-.051	-.059	.050	.005	.079	-.283	.017
1. Faith Based	.28	.449	-	-.177	-.051	-.022	-.043	.007	-.051	-.081
2. For Profit	.07	.262		-	-.047	-.070	-.035	-.080	.101	-.076
3. Academic	.03	.161			-	.083	-.021	.193	-.015	-.058
4. Most Wired™	.17	.376				-	-.015	.246	-.048	-.027
5. Baldrige	.02	.123					-	.120	.011	-.043
6. MAGNET™	.15	.360						-	-.070	-.046
7. Safety Net	.10	.299							-	-.054
8. Sole Provider	.11	.311								-

Table 220 – Domain 4, Region 5: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.655	(-1.627, .316)	-.075	-1.744	.082
For Profit	-.510	(-2.182, 1.162)	-.034	-.788	.431
Academic	-2.052	(-4.757, .654)	-.084	-1.960	.050
Most Wired™	.239	(-.935, 1.414)	.023	.527	.599
Baldrige	-.204	(-3.791, 3.311)	-.006	-.150	.881
MAGNET™	.750	(.506, 2.007)	.069	1.544	.123
Safety Net	-3.668	(-5.105, -2.231)	-.279	-6.598	.000
Sole Provider	-.102	(-1.488, 1.283)	-.008	-.191	.849

Table 221 – Domain 4, Region 5: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
71.464	HCAHPS© Score = 71.4654 - .6455(Faith Based) - .510(For Profit) – 2.052(Academic) + .239(Most Wired™) - .204(Baldrige) + .750(MAGNET™) – 3.668(Safety Net) - .102(Sole Provider)	.096	.082	.000

Table 222 – Domain 4, Region 6: Means, Standard Deviations, and Intercorrelations, n = 484 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Pain Control	71.55	5.712	.037	-.152	-.049	-.029	.	-.024	-.200	.052
Predictor Value										
1. Faith Based	.24	.429	-	-.333	-.069	.149	.	.219	-.185	-.140
2. For Profit	.28	.451		-	-.081	.052	.	-.056	.063	-.145
3. Academic	.03	.168			-	.157	.	.153	.105	-.087
4. Most Wired™	.13	.332				-	.	.250	.006	-.160
5. Baldrige	.00	.000					-			
6. MAGNET™	.07	.249						-	-.075	-.134
7. Safety Net	.35	.478							-	-.007
8. Sole Provider	.20	.402								-

Table 223 – Domain 4, Region 6: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.614	(-2.355, 1.128)	-.046	-.912	.362
For Profit	-1.997	(-3.594, -.400)	-.158	-3.234	.001
Academic	-1.328	(-5.408, 2.752)	-.039	-.842	.400
Most Wired™	.053	(-2.037, 2.143)	.003	.065	.948
MAGNET™	-.709	(-3.516, 2.099)	-.031	-.653	.514
Safety Net	-2.354	(-3.756, -.953)	-.197	-4.344	.000
Sole Provider	.203	(-1.504, 1.909)	.014	.307	.759

Table 224 – Domain 4, Region 6: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
73.137	HCAHPS© Score = 73.137 - .614(Faith Based) – 1.997(For Profit) – 1.328(Academic) + .053(Most Wired™) - .709(MAGNET™) – 2.354(Safety Net) + .203(Sole Provider)	.065	.051	.000

Table 225 – Domain 4, Region 7: Means, Standard Deviations, and Intercorrelations, n = 172

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Pain Control Predictor Value	69.83	4.034	.159	-.166	-.008	-.069	.174	.082	-.110	-.054
1. Faith Based	.34	.474	-	-.280	-.002	-.058	.251	.052	-.046	-.161
2. For Profit	.13	.341		-	-.075	.188	-.087	-.016	.060	.027
3. Academic	.03	.184			-	.168	.108	.256	.054	-.117
4. Most Wired™	.17	.375				-	.048	.059	.081	-.102
5. Baldrige	.05	.211					-	.019	.030	-.073
6. MAGNET™	.10	.299						-	-.102	-.116
7. Safety Net	.09	.283							-	-.051
8. Sole Provider	.27	.447								-

Table 226 – Domain 4, Region 7: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.608	(-1.207, 2.424)	.071	.873	.384
For Profit	-1.418	(-3.888, 1.053)	-.120	-1.496	.137
Academic	-.954	(-5.530, 3.622)	-.044	-.543	.588
Most Wired™	-.461	(-2. 657, 1.736)	-.043	-.547	.585
Baldrige	2.894	(-1.006, 6.793)	.151	1.934	.055
MAGNET™	.996	(-1.771, 3.764)	.074	.938	.349
Safety Net	-1.310	(-4.146, 1.526)	-.092	-1.204	.230
Sole Provider	-.308	(-2.130, 1.514)	-.034	-.440	.660

Table 227 – Domain 4, Region 7: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
69.886	HCAHPS© Score = 69.,886 + .608(Faith Based) – 1.418(For Profit) - .954(Academic) - .461 (Most Wired™) + 2.894(Baldrige) + .996(MAGNET™) – 1.310(Safety Net) - .308(Sole Provider)	.079	.034	.091

Table 228 – Domain 4, Region 8: Means, Standard Deviations, and Intercorrelations, n = 121

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Pain Control Predictor Value	60.44	9.837	-.027	-.010	.052	-.016	-.004	-.005	-.268	-.084
1. Faith Based	.21	.412	-	-.210	-.048	-.146	-.048	.115	-.130	-.094
2. For Profit	.20	.400		-	-.045	.233	-.045	-.085	-.123	-.153
3. Academic	.01	.091			-	-.063	-.008	.289	-.023	-.068
4. Most Wired™	.32	.469				-	-.063	-.034	-.095	-.216
5. Baldrige	.01	.091					-	.289	-.023	-.068
6. MAGNET™	.09	.289						-	-.078	-.235
7. Safety Net	.06	.234							-	-.036
8. Sole Provider	.36	.481								-

Table 229 – Domain 4, Region 8: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-2.360	(-8.358, 3.637)	-.099	-1.031	.305
For Profit	-1.917	(-8.115, 4.282)	-.078	-.810	.420
Academic	4.553	(-22.335, 31.440)	.042	.444	.658
Most Wired™	-1.556	(-6.819, 3.707)	-.074	-.775	.440
Baldrige	-1.447	(-28.335, 25.440)	-.013	-.141	.888
MAGNET™	-2.388	(-11.506, 6.730)	-.070	-.686	.494
Safety Net	-12.895	(-23.097, -2.692)	-.307	-3.312	.001
Sole Provider	-3.013	(-8.226, 2.200)	-.147	-1.515	.133

Table 230 – Domain 4, Region 8: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
63.835	HCAHPS© Score = 63.835 – 2.360(Faith Based) – 1.917(For Profit) + 4.553(Academic) – 1.556(Most Wired™) – 1.447(Baldrige) + 2.388(MAGNET™) – 12.895(Safety Net) – 3.013(Sole Provider)	.102	.038	.136

Table 231 – Domain 4, Region 9: Means, Standard Deviations, and Intercorrelations, n = 364

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Pain Control Predictor Value	68.16	5.661	.021	-.290	.020	.137	.143	.115	-.334	.096
1. Faith Based	.18	.381	-	-.265	-.092	-.118	-.055	-.038	-.009	-.060
2. For Profit	.25	.432		-	-.115	-.121	-.068	-.175	.191	-.079
3. Academic	.04	.193			-	.082	-.024	.195	.152	-.060
4. Most Wired™	.20	.397				-	.121	.098	-.207	-.148
5. Baldrige	.01	.117					-	.133	-.018	-.035
6. MAGNET™	.09	.280						-	-.056	-.091
7. Safety Net	.48	.500							-	-.147
8. Sole Provider	.08	.275								-

Table 232 – Domain 4, Region 9: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.291	(-2.260, 1.678)	-.020	-.383	.702
For Profit	-2.815	(-4.606, -1.023)	-.215	-4.069	.000
Academic	.885	(-2.961, 4.731)	.030	.596	.552
Most Wired™	.546	(-1.344, 2.436)	.038	.748	.455
Baldrige	5.563	(.577, 11.703)	.115	2.346	.020
MAGNET™	.834	(-1.803, 3.471)	.041	.819	.413
Safety Net	-3.148	(-4.655, -1.641)	-.278	-5.409	.000
Sole Provider	1.071	(-1.590, 3.731)	.052	1.042	.298

Table 233 – Domain 4, Region 9: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
70.035	HCAHPS© Score = 70.035 - .291(Faith Based) – 2.815(For Profit) + .885(Academic) + .546(Most Wired™) + 5.563(Baldrige) + .834(MAGNET™) – 3.148(Safety Net) + 1.071(Sole Provider)	.187	.168	.000

Table 234 – Domain 4, Region 10: Means, Standard Deviations, and Intercorrelations, n = 107

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Pain Control Predictor Value	69.37	4.392	.008	-.127	.058	-.160	-.031	.097	-.078	-.020
1. Faith Based	.31	.464	-	-.270	-.065	-.139	-.065	.016	-.159	-.069
2. For Profit	.14	.349		-	-.039	.083	-.039	-.122	.041	-.028
3. Academic	.01	.097			-	-.038	-.009	.321	-.033	-.042
4. Most Wired™	.13	.339				-	-.038	-.018	.051	-.017
5. Baldrige	.01	.097					-	.321	.287	-.042
6. MAGNET™	.08	.279						-	.008	-.132
7. Safety Net	.10	.305							-	-.063
8. Sole Provider	.16	.367								-

Table 235 – Domain 4, Region 10: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.588	(-3.196, 2.019)	-.062	-.592	.555
For Profit	-1.503	(-4.911, 1.906)	-.119	-1.158	.250
Academic	.459	(-12.068, 12.985)	.010	.096	.924
Most Wired™	-2.025	(-5.415, 1.365)	-.156	-1.569	.120
Baldrige	-2.673	(-15.766, 10.420)	-.059	-.536	.593
MAGNET™	1.481	(-3.162, 6.123)	.094	.838	.404
Safety Net	-.868	(-4.815, 3.078)	-.060	-.578	.565
Sole Provider	-.280	(-3.413, 2.854)	-.023	-.234	.815

Table 236 – Domain 4, Region 10: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
70.061	HCAHPS© Score = 70.061 - .588(Faith Based) – 1.503(For Profit) + .459 (Academic) – 2.025(Most Wired™) – 2.673(Baldrige) + 1.481(MAGNET™) - .868(Safety Net) - .280(Sole Provider)	.056	-.021	.663

APPENIDIX M – MULTIPLE REGRESSION ANALYSIS, DOMAIN 5 – ROOM AND BATHROOM CLEANLINESS

Table 237 – Domain 5, All Variables: Means, Standard Deviations, and Intercorrelations, N = 3089

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Room and Bathroom Cleanliness Predictor Value	71.65	6.701	.001	-.178	-.109	-.042	.004	-.023	-.136	.140
1. Faith Based	.20	.402	-	-.237	-.063	-.030	.031	.053	-.080	-.078
2. For Profit	.20	.399		-	-.080	.036	-.047	-.133	.102	-.062
3. Academic	.03	.180			-	.094	.002	.203	.062	-.074
4. Most Wired™	.19	.391				-	.017	.147	-.103	-.098
5. Baldrige	.01	.093					-	.080	-.014	-.027
6. MAGNET™	.11	.309						-	-.103	-.098
7. Safety Net	.25	.433							-	-.019
8. Sole Provider	.14	.344								-

Table 238 – Domain 5, All Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.821	(-1.596, -.045)	-.049	-2.728	.006
For Profit	-3.028	(-3.815, -2.241)	-.180	-9.919	.000
Academic	-3.879	(-5.596, -2.241)	-.104	-5.822	.000
Most Wired™	-.445	(-1229, .339)	-.026	-1.463	.143
Baldrige	.079	(-3.147, 3.306)	.001	.063	.950
MAGNET™	-.444	(-1.460, .573)	-.020	-1.125	.261
Safety Net	-1.829	(-2.535, -1.124)	-.118	-6.686	.000
Sole Provider	2.148	(1.262, 3.034)	.110	6.249	.000

Table 239 – Domain 5, All Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
72.840	HCAHPS© Score = 72.840 - .821(Faith Based) – 3.028(For Profit) – 3.879(Academic) - .445(Most Wired™) + .079(Baldrige) - .444(MAGNET™) – 1.829(Safety Net) + 2.148(Sole Provider)	.077	.074	.000

Table 240 – Domain 5, Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3089

Variable	*M*	*SD*	1	2	3
Room and Bathroom Cleanliness Predictor Value	71.65	6.701	-.042	.004	-.023
1. Most Wired™	.19	.391	-	.017	.147
2. Baldrige	.01	.093		-	.080
3. MAGNET™	.11	.309			-

Table 241 – Domain 5, Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Baldrige	-.684	(-1.488, .120)	-.040	-2.194	.028
MAGNET™	.467	(-2.881, 3.814)	.006	.359	.719
Most Wired™	-.375	(-1.395, .645)	-.017	-.948	.343

Table 242 – Domain 5, Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
71.812	HCAHPS© Score = 71.812 - .684(Baldrige) + .467(MAGNET™) - .375(Most Wired™)	.002	.001	.089

Non-Application variables

Table 243 – Domain 5, Non-Application Variables: Means, Standard Deviations, and for Intercorrelations, N = 3089

Variable	*M*	*SD*	1	2	3	4	5
Room and Bathroom Cleanliness Predictor Value	71.65	6.701	.001	-.178	-.109	-.136	.140
1. Faith Based	.20	.402	-	-.237	-.063	-.080	-.078
2. For Profit	.20	.399		-	-.080	.102	-.062
3. Academic	.03	.180			-	.062	-.074
4. Safety Net	.25	.433				-	-.019
5. Sole Provider	.14	.344					-

Table 244 – Domain 5, Non-Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.816	(-1.590, -.041)	-.049	-2.714	.007
Fort Profit	-3.011	(-3.792, -2.230)	-.179	-9.938	.000
Academic	-4.120	(-5.799, -2.441)	-.111	-6.323	.000
Safety Net	-1.749	(-2.447, -1.052)	-.113	-6.465	.000
Sole Provider	2.230	(1.351, 3.109)	.114	6.538	.000

Table 245 – Domain 5, Non-Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
72.682	HCAHPS© Score = 72.682 - .816(Faith Based) – 3.011(For Profit) – 4.120(Academic) – 1.749(Safety Net) + 2.230(Sole Provider)	.075	.074	.000

Table 246 – Domain 5, Response Rate Low: Means, Standard Deviations, and Intercorrelations, n = 122 (No Baldrige coded 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Room and Bathroom Cleanliness Predictor Value	67.96	8.432	.216	.007	-.150	.001	.	.054	-.123	.304
1. Faith Based	.12	.330	-	-.204	-.092	.015	.	-.048	-.044	.085
2. For Profit	.23	.422		-	-.135	-.135	.	-.070	-.082	-.154
3. Academic	.06	.234			-	-.061	.	-.032	.081	-.070
4. Most Wired™	.06	.234				-	.	-.032	.081	-.070
5. Baldrige	.00	.000					-			
6. MAGNET™	.02	.128						-	.043	-.036
7. Safety Net	.90	.299							-	.093
8. Sole Provider	.07	.262								-

Table 247 – Domain 5, Response Rate Low: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	5.023	(-.884, 10.930)	.196	2.228	.028
For Profit	1.696	(-3.061, 6.454)	.085	.934	.352
Academic	-2.967	(-11.273, 5.339)	-.082	-.936	.351
Most Wired™	1.458	(-6.790, 9.707)	.040	.463	.644
MAGNET™	5.676	(-9.228, 20.580)	.086	.998	.321
Safety Net	-3.857	(-10.256, 2.543)	-.137	-1.579	.117
Sole Provider	10.060	(2.676, 17.443)	.313	3.569	.001

Table 248 – Domain 5, Response Rate Low: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
69.681	HCAHPS© Score = 69.681 + 5.023(Faith Based) +1.696(For Profit) – 2.967(Academic) + 1.458(Most Wired™) +5.676(MAGNET™) – 3.857(Safety Net) + 10.060(Sole Provider)	.172	.121	.003

Table 249 – Domain 5, Response Rate Medium: Means, Standard Deviations, and Intercorrelations, n = 1531

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Room and Bathroom Cleanliness Predictor Value	70.91	6.551	.010	-.171	-.078	-.038	-.009	-.022	-.096	.133
1. Faith Based	.20	.398	-	-.231	-.069	-.003	.012	.084	-.069	-.112
2. For Profit	.20	.401		-	-.102	.021	-.045	-.139	.091	-.037
3. Academic	.05	.209			-	.118	-.019	.242	.032	-.084
4. Most Wired™	.19	.391				-	-.005	.163	-.099	-.111
5. Baldrige	.01	.088					-	.042	-.015	-.034
6. MAGNET™	.10	.306						-	-.105	-.099
7. Safety Net	.33	.471							-	-.006
8. Sole Provider	.13	.335								-

Table 250 – Domain 5, Response Rate Medium: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.467	(-1.570, .637)	-.028	-1.091	.276
For Profit	-2.900	(-4.000, -1.801)	-.177	-6.805	.000
Academic	-2.498	(-4.606, -.390)	-.080	-3.056	.002
Most Wired™	-.298	(-1.399, .804)	-.018	-.697	.486
Baldrige	-1.097	(-5.870, 3.676)	-.015	-.593	.553
MAGNET™	-.405	(-1.859, 1.048)	-.019	-.719	.472
Safety Net	-1.148	(-2.053, -.242)	-.083	-3.268	.001
Sole Provider	2.191	(.911, 3.472)	.112	4.413	.000

Table 251 – Domain 5, Response Rate Medium: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
71.901	HCAHPS© Score = 71.901 - .467(Faith Based) – 2.900(For Profit) – 2.498(Academic) - .298(Most Wired™) – 1.097(Baldrige) - .405(MAGNET™) – 1.148(Safety Net) + 2.191(Sole Provider)	.060	.055	.000

Table 252 – Domain 5, Response Rate High: Means, Standard Deviations, and Intercorrelations, n = 1436

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Room and Bathroom Cleanliness Predictor Value	72.75	6.475	-.044	-.207	-.127	-.072	.009	-.048	-.042	.122
1. Faith Based	.21	.411	-	-.244	-.047	-.064	.046	.021	-.070	-.059
2. For Profit	.19	.396		-	-.042	.064	-.051	-.130	.149	-.080
3. Academic	.02	.136			-	.085	.036	.189	.052	-.058
4. Most Wired™	.20	.399				-	.035	.129	-.081	-.093
5. Baldrige	.01	.102					-	.112	.009	-.024
6. MAGNET™	.12	.322						-	-.070	-.105
7. Safety Net	.11	.309							-	.006
8. Sole Provider	.15	.358								-

Table 253 – Domain 5, Response Rate High: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-1.659	(-2.730, -.587)	-.105	-3.993	.000
For Profit	-3.773	(-4.905, -2.642)	-.231	-8.603	.000
Academic	-5.970	(-9.165, -2.775)	-.125	-4.820	.000
Most Wired™	-.690	(-1.774, .395)	-.042	-1.640	.101
Baldrige	.966	(-3.229, 5.162)	.015	.594	.552
MAGNET™	-.826	(-2.202, .550)	-.041	-1.549	.122
Safety Net	-.317	(-1.716, 1.081)	-.015	-.585	.558
Sole Provider	1.479	(.278, 2.681)	.082	3.175	.002

Table 254 – Domain 5, Response Rate High: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
73.987	HCAHPS© Score = 73.987 – 1.659(Faith Based) – 3.773(For Profit) – 5.970(Academic) - .690(Most Wired™) + .966(Baldrige) - .826(MAGNET™) - .317(Safety Net) + 1.479(Sole Provider)	.084	.079	.000

Table 255 – Domain 5, Region 1: Means, Standard Deviations, and Intercorrelations, n = 131 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Room and Bathroom Cleanliness Predictor Value	73.50	5.495	-.013	-.325	-.139	-.011	.	.018	-.140	.100
1. Faith Based	.11	.310	-	-.009	-.082	-.134	.	.068	-.054	-.099
2. For Profit	.15	.361		-	-.101	.063	.	-.175	.101	-.042
3. Academic	.05	.226			-	.027	.	.095	.119	-.068
4. Most Wired™	.24	.427				-	.	.128	-.153	-.092
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.353						-	-.087	-.037
7. Safety Net	.12	.329							-	-.107
8. Sole Provider	.08	.267								-

Table 256 – Domain 5, Region 1: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.435	(-4.394, 3.524)	-.025	-.287	.774
For Profit	-5.118	(-8.532, -1.704)	-.336	-3.922	.000
Academic	-3.856	(-9.278, 1.566)	-.158	-1.861	.065
Most Wired™	.105	(-2.822, 3.032)	.008	.094	.925
MAGNET™	-.466	(-3.968, 3.035)	-.030	-.348	.728
Safety Net	-1.395	(-5.176, 2.387)	-.083	-.965	.336
Sole Provider	1.304	(-3.282, 5.891)	.063	.744	.458

Table 257 – Domain 5, Region 1: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
74.644	HCAHPS© Score = 74.644 - .435(Faith Based) – 5.118(For Profit) – 3.856(Academic) + .105(Most Wired™) - .466(MAGNET™) – 1.395(Safety Net) + 1.304(Sole Provider)	.149	.101	.005

Table 258 – Domain 5, Region 2: Means, Standard Deviations, and Intercorrelations, n = 208

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Room and Bathroom Cleanliness Predictor Value	51.51	5.742	-.171	.113	.001	.034	.017	.175	-.017	-.010
1. Faith Based	.13	.332	-	-.080	-.098	-.026	-.037	.032	-.041	-.109
2. For Profit	.04	.204		-	-.055	-.017	-.021	-.046	.026	-.061
3. Academic	.06	.243			-	.183	-.025	.072	.061	-.075
4. Most Wired™	.14	.347				-	-.040	.254	-.096	-.012
5. Baldrige	.01	.098					-	.075	-.061	-.028
6. MAGNET™	.20	.399						-	-.146	-.143
7. Safety Net	.28	.450							-	-.099
8. Sole Provider	.08	.267								-

Table 259 – Domain 5, Region 2: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-2.954	(-6.084, .177)	-.171	-2.454	.015
For Profit	3.005	(-2.039, 8.048)	.107	1.549	.123
Academic	-.495	(-4.823, 3.832)	-.021	-.298	.766
Most Wired™	-.216	(-3.311, 2.878)	-.013	-.182	.856
Baldrige	-.136	(-10.634, 10.361)	-.002	-.034	.973
MAGNET™	2.751	(-042, 5.461)	.191	2.641	.009
Safety Net	.026	(-2.300, 2.351)	.002	.029	.977
Sole Provider	.076	(-3.856, 4.007)	.004	.050	.960

Table 260– Domain 5, Region 2: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
51.261	HCAHPS© Score = 51.261 – 2.954(Faith Based) + 3.005(For Profit) - .495(Academic) - .216(Most Wired™) – 1.36(Baldrige) + 2.751(MAGNET™) + .026(Safety Net) + .076(Sole Provider)	.074	.037	.049

Table 261 – Domain 5, Region 3: Means, Standard Deviations, and Intercorrelations, n = 294 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Room and Bathroom Cleanliness Predictor Value	70.64	6.211	-.256	.027	-.256	-.039	.	-.133	-.134	.241
1. Faith Based	.10	.294	-	-.142	-.031	.092	.	.030	.254	-.074
2. For Profit	.16	.367		-	-.029	-.184	.	-.128	-.053	.032
3. Academic	.06	.234			-	.093	.	.310	.100	-.085
4. Most Wired™	.30	.459				-	.	.234	-.108	-.079
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.354						-	-.093	-.079
7. Safety Net	.15	.357							-	.011
8. Sole Provider	.11	.308								-

Table 262 – Domain 5, Region 3: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-5.015	(-8.107, -1.923)	-.237	-4.206	.000
For Profit	-.436	(-2.857, 1.984)	-.026	-.468	.640
Academic	-6.016	(-9.955, -2.076)	-.226	-3.960	.000
Most Wired™	.289	(-1.692, 2.270)	.021	.378	.705
MAGNET™	-.934	(-3.589, 1.722)	-.053	-.912	.363
Safety Net	-1.000	(-3.560, 1.559)	-.058	-1.014	.312
Sole Provider	4.107	(1.278, 6.936)	.203	3.765	.000

Table 263 – Domain 5, Region 3: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
71.305	HCAHPS© Score = 71.305 – 5.015(Faith Based) - .436(For Profit) – 6.016(Academic) + .289(Most Wired™) - .934(MAGNET™) – 1.000(Safety Net) + 4.107(Sole Provider)	.181	.161	.000

Table 264 – Domain 5, Region 4: Means, Standard Deviations, and Intercorrelations, n = 682

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Room and Bathroom Cleanliness Predictor Value	71.32	6.142	.048	-.272	-.077	-.153	.033	-.036	.167	.106
1. Faith Based	.16	.369	-	-.278	-.045	-.032	.050	.084	-.096	-.090
2. For Profit	.31	.463		-	-.107	.184	-.036	-.170	.007	-.060
3. Academic	.02	.156			-	.066	-.009	.254	.009	-.056
4. Most Wired™	.19	.393				-	.043	.015	-.155	-.109
5. Baldrige	.00	.054					-	-.015	-.038	-.019
6. MAGNET™	.07	.253						-	-.116	-.058
7. Safety Net	.33	.469							-	.159
8. Sole Provider	.11	.311								-

Table 265 – Domain 5, Region 4: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.256	(-1.893, 1.381)	-.015	-.404	.686
For Profit	-3.676	(-5.015, -2.336)	-.277	-7.088	.000
Academic	-3.618	(-7.457, .221)	-.092	-2.435	.015
Most Wired™	-1.075	(-2.587, .437)	-.069	-1.836	.067
Baldrige	3.559	(-7.054, 14.173)	.031	.866	.387
MAGNET™	-.889	(-3.272, 1.493)	-.037	-.964	.335
Safety Net	1.920	(.659, 3.181)	.147	3.934	.000
Sole Provider	.990	(-.896, 2.876)	.050	1.356	.176

Table 266 – Domain 5, Region 4: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
72.106	HCAHPS© Score = 72.106 - .256(Faith Based) – 3.676(For Profit) – 3.618(Academic) – 1.075(Most Wired™) + 3.559(Baldrige) - .889(MAGNET™) + 1.920(Safety Net) + .990(sole Provider)	.124	.114	.000

Table 267 – Domain 5, Region 5: Means, Standard Deviations, and Intercorrelations, n = 526

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Room and Bathroom Cleanliness	73.58	6.559	-.044	-.109	-.143	.020	-.073	-.070	-.295	.115
Predictor Value										
1. Faith Based	.28	.449	-	-.176	-.050	-.021	-.043	.008	-.050	-.081
2. For Profit	.07	.262		-	-.047	-.070	-.035	-.079	.101	-.075
3. Academic	.03	.161			-	.083	-.021	.193	-.015	-.058
4. Most Wired™	.17	.375				-	-.015	.247	-.048	-.027
5. Baldrige	.02	.123					-	.120	.011	-.043
6. MAGNET™	.15	.359						-	-.069	-.045
7. Safety Net	.10	.299							-	-.054
8. Sole Provider	.11	.311								-

Table 268 – Domain 5, Region 5: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-1.159	(-2.740, .422)	-.079	-1.895	.059
For Profit	-2.529	(-5.250, .192)	-.101	-2.403	.017
Academic	-5.809	(-10.213, -1.406)	-.143	-3.411	.001
Most Wired™	.463	(-1.448, 2.374)	.026	.626	.531
Baldrige	-3.645	(-9.367, 2.076)	-.068	-1.647	.100
MAGNET™	-1.187	(-3.232, .858)	-.065	-1.500	.134
Safety Net	-6.354	(-8.693, -4.015)	-.289	-7.023	.000
Sole Provider	1.526	(-.728, 3.781)	.072	1.750	.081

Table 269 – Domain 5, Region 5: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
74.870	HCAHPS© Score = 74.870 – 1.1509(Faith Based) – 2.529(For Profit) – 5.809(Academic) + .463(Most Wired™) – 3.645(Baldrige) – 1.187(MAGNET™) – 6.354(Safety Net) + 1.526(Sole Provider)	.139	.125	.000

Table 270 – Domain 5, Region 6: Means, Standard Deviations, and Intercorrelations, n = 484 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Room and Bathroom Cleanliness Predictor Value	72.70	7.108	.037	-.222	-.066	-.032	.	-.084	-.111	.092
1. Faith Based	.24	.429	-	-.333	-.069	.149	.	.219	-.185	-.140
2. For Profit	.28	.451		-	-.081	.052	.	-.056	.063	-.145
3. Academic	.03	.168			-	.157	.	.153	.105	-.087
4. Most Wired™	.13	.332				-	.	.250	.006	-.160
5. Baldrige	.00	.000					-			
6. MAGNET™	.07	.249						-	-.075	-.134
7. Safety Net	.35	.478							-	-.007
8. Sole Provider	.20	.402								-

Table 271 – Domain 5, Region 6: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.738	(-2.892, 1.,415)	-.045	-.887	.376
For Profit	-3.726	(-5.701, -1.750)	-.236	-4.878	.000
Academic	-2.733	(-7.780, 2.313)	-.065	-1.401	.162
Most Wired™	.535	(-2.050, 3.120)	.025	.535	.593
MAGNET™	-2.467	(-5.939, 1.005)	-.086	-1.837	.067
Safety Net	-1.538	(-3.272, .195)	-.104	-2.295	.022
Sole Provider	.667	(-1.444, 2.777)	.038	.817	.414

Table 272 – Domain 5, Region 6: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
74.517	HCAHPS© Score = 74.517 - .738(Faith Based) – 3.726(For Profit) – 2.733(Academic) + .535(Most Wired™) – 2.467(MAGNET™) – 1.538(Safety Net) + .667(Sole Provider)	.076	.063	.000

Table 273 – Domain 5, Region 7: Means, Standard Deviations, and Intercorrelations, n = 172

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Room and Bathroom Cleanliness Predictor Value	72.89	6.103	.035	-.164	-.111	-.089	-.023	-.151	-.130	.157
1. Faith Based	.34	.474	-	-.280	-.002	-.058	.251	.052	-.046	-.161
2. For Profit	.13	.341		-	-.075	.188	-.087	-.016	.060	.027
3. Academic	.03	.184			-	.168	.108	.256	.054	-.117
4. Most Wired™	.17	.375				-	.048	.059	.081	-.102
5. Baldrige	.05	.211					-	.019	.030	-.073
6. MAGNET™	.10	.299						-	-.102	-.116
7. Safety Net	.09	.283							-	-.051
8. Sole Provider	.27	.447								-

Table 274 – Domain 5, Region 7: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.209	(-2.518, 2.935)	.016	.200	.842
For Profit	-2.886	(-6.595, .824)	-.161	-2.027	.044
Academic	-2.073	(-8.945, .4799)	-.062	-.786	.433
Most Wired™	-.242	(-3.541, 3.056)	-.015	-.192	.848
Baldrige	-.517	(-6.373, 5.338)	-.018	-.230	.818
MAGNET™	-2.736	((-6.891, 1.420)	-.134	-1.716	.088
Safety Net	-2.617	(-6.875, 1.642)	-.121	-1.601	.111
Sole Provider	1.805	(-.931, 4.541)	.132	1.719	.087

Table 275 – Domain 5, Region 7: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
73.348	HCAHPS© Score = 73.348 + .209(Faith Based) – 2.886(For Profit) – 2.073(Academic) - .242(Most Wired™) - .517(Baldrige) – 2.736(MAGNET™) – 2.617(Safety Net) + 1.805(Sole Provider)	.092	.048	.041

Table 276 – Domain 5, Region 8: Means, Standard Deviations, and Intercorrelations, n = 121

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Room and Bathroom Cleanliness Predictor Value	71.80	9.562	-.080	-.098	.002	.061	.059	.025	-.311	.159
1. Faith Based	.21	.412	-	-.210	-.048	-.146	-.048	.115	-.130	-.094
2. For Profit	.20	.400		-	-.045	.233	-.045	-.085	-.123	-.153
3. Academic	.01	.091			-	-.063	-.008	.289	-.023	-.068
4. Most Wired™	.32	.469				-	-.063	-.034	-.095	-.216
5. Baldrige	.01	.091					-	.289	-.023	-.068
6. MAGNET™	.09	.289						-	-.078	-.235
7. Safety Net	.06	.234							-	-.036
8. Sole Provider	.36	.481								-

Table 277 – Domain 5, Region 8: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-3.111	(-8.750, 2.528)	-.134	-1.446	.151
For Profit	-3.869	(-9.698, 1.959)	-.162	-1.740	.085
Academic	-1.273	(-26.555, 24.009)	-.012	-.132	.895
Most Wired™	1.619	(-3.330, 6.567)	.079	.857	.393
Baldrige	4.727	(-20.555, 30.009)	.045	.490	.625
MAGNET™	.826	(-7.747, 9.400)	.025	.253	.801
Safety Net	-13.586	(-23.179, -3.993)	-.333	-3.711	.000
Sole Provider	2.678	(-2.224, 7.579)	.135	1.432	.155

Table 278 – Domain 5, Region 8: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
72.447	HCAHPS© Score = 72.447 – 3.111(Faith Based) – 3.869(For Profit) – 1.273(Academic) + 1.619(Most Wired™) + 4.727(Baldrige) + .826(MAGNET™) – 13.586(Safety Net) + 2.678(Sole Provider)	.160	.100	.010

Table 279 – Domain 5, Region 9: Means, Standard Deviations, and Intercorrelations, n = 364

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Room and Bathroom Cleanliness Predictor Value	69.21	6.344	-.015	-.224	-.061	.006	.149	.099	-.244	.134
1. Faith Based	.18	.381	-	-.265	-.092	-.118	-.055	-.038	-.009	-.060
2. For Profit	.25	.432		-	-.115	-.121	-.068	-.175	.191	-.079
3. Academic	.04	.193			-	.082	-.024	.195	.152	-.060
4. Most Wired™	.20	.397				-	.121	.098	-.207	-.148
5. Baldrige	.01	.117					-	.133	-.018	-.035
6. MAGNET™	.09	.280						-	-.056	-.091
7. Safety Net	.48	.500							-	-.147
8. Sole Provider	.08	.275								-

Table 280 – Domain 5, Region 9: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-1.121	(-3.402, 1.160)	-.067	-1.273	.204
For Profit	-2.842	(-4.917, -.767)	-.194	-3.547	.000
Academic	-1.883	(-6.338, 2.572)	-.057	-1.095	.274
Most Wired™	-1.136	(-3.326, 1.054)	-.071	-1.343	.180
Baldrige	7.114	(.002, 14.226)	.131	2.590	.010
MAGNET™	1.357	(-1.697, 4.411)	.060	1.151	.251
Safety Net	-2.483	(-4.228, -.737)	-.196	-3.683	.000
Sole Provider	1.886	(-1.195, 4.967)	.082	1.585	.114

Table 281 – Domain 5, Region 9: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
71.218	HCAHPS© Score = 71.218 – 1.121(Faith Based) – 2.842(For Profit) – 1.883(Academic) – 1.136(Most Wired™) + 7.114(Baldrige) + 1.357(MAGNET™) – 2.483(Safety Net) + 1.886(Sole Provider)	.131	.112	.000

Table 282 – Domain 5, Region 10: Means, Standard Deviations, and Intercorrelations, n = 107

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Room and Bathroom Cleanliness Predictor Value	72.09	5.934	-.144	-.079	.048	-.199	-.133	-.005	-.104	.084
1. Faith Based	.31	.464	-	-.270	-.065	-.139	-.065	.016	-.159	-.069
2. For Profit	.14	.349		-	-.039	.083	-.039	-.122	.041	-.028
3. Academic	.01	.097			-	-.038	-.009	.321	-.033	-.042
4. Most Wired™	.13	.339				-	-.038	-.018	.051	-.017
5. Baldrige	.01	.097					-	.321	.287	-.042
6. MAGNET™	.08	.279						-	.008	-.132
7. Safety Net	.10	.305							-	-.063
8. Sole Provider	.16	.367								-

Table 283 – Domain 5, Region 10: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-2.877	(-6.283, .530)	-.225	-2.218	.029
For Profit	-2.015	(-6.467, 2.437)	-.118	-1.189	.237
Academic	.503	(-15.860, 16.866)	.008	.081	.936
Most Wired™	-3.847	(-8.276, .582)	-.220	-2.282	.025
Baldrige	-8.964	(-26.068, 8.139)	-.146	-1.377	.172
MAGNET™	.693	(-5.371, 6.757)	.033	.300	.765
Safety Net	-1.532	(-6.688, 3.623)	-.079	-.781	.437
Sole Provider	.888	(-3.205, 4.982)	.055	.570	.570

Table 284 – Domain 5, Region 10: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
73.804	HCAHPS© Score = 73.804 – 2.877(Faith Based) – 2.015(For Profit) + .503(Academic) – 3.847(Most Wired™) – 8.964(Baldrige) + .693(MAGNET™) – 1.532(Safety Net) + .888(Sole Provider)	.118	.046	.124

APPENIDIX N – MULTIPLE REGRESSION ANALYSIS, DOMAIN 6 – FACILITY QUIETNESS

Table 285 – Domain 6, All Variables: Means, Standard Deviations, and Intercorrelations, N = 3089

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Facility Quietness	59.81	9.258	.021	.034	-.070	-.064	.003	-.078	.026	.073
Predictor Value										
1. Faith Based	.20	.402	-	-.237	-.063	-.030	.031	.053	-.080	-.078
2. For Profit	.20	.399		-	-.080	.036	-.047	-.133	.102	-.062
3. Academic	.03	.180			-	.094	.002	.203	.062	-.074
4. Most Wired™	.19	.391				-	.017	.147	-.103	-.098
5. Baldrige	.01	.093					-	.080	-.014	-.027
6. MAGNET™	.11	.309						-	-.103	-.098
7. Safety Net	.25	.433							-	-.019
8. Sole Provider	.14	.344								-

Table 286 – Domain 6, All Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.780	(-.324, 1.885)	.034	1.820	.069
For Profit	.813	(-.308, 1.935)	.035	1.869	.062
Academic	-2.403	(-4.851, .044)	-.047	-2.531	.011
Most Wired™	-1.031	(-2.148, .086)	-.044	-2.379	.017
Baldrige	1.028	(-3.570, 5.627)	.010	.576	.564
MAGNET™	-1.558	(-3.006, -.110)	-.052	-2.772	.006
Safety Net	.412	(-.593, 1.417)	.019	1.057	.291
Sole Provider	1.767	(.505, 3.030)	.066	3.607	.000

Table 287 – Domain 6, All Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
59.577	HCAHPS© Score = 59.577 + .780(Faith Based) + .813(For Profit) – 2.403(Academic) – 1.031(Most Wired™) + 1.028(Baldrige) – 1.558(MAGNET™) + .412(Safety Net) + 1.767(Sole Provider)	.017	.015	.000

Table 288 – Domain 6, Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3089

Variable	*M*	*SD*	1	2	3
Facility Quietness Predictor Value	59.81	9.258	-.064	.003	-.078
1. Most Wired™	.19	.391	-	.017	.147
2. Baldrige	.01	.093		-	.080
3. MAGNET™	.11	.309			-

Table 289 – Domain 6, Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Most Wired™	-1.261	(-2.367, -.154)	-.053	-2.937	.003
Baldrige	.925	(-3.683, 5.534)	.009	.517	.605
MAGNET™	-2.135	(-3.539, -.732)	-.071	-3.920	.000

Table 290 – Domain 6, Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
60.266	HCAHPS© Score = 60.266 – 1.261(Most Wired™) + .925(Baldrige) – 2.135(MAGNET™)	.009	.008	.000

Table 291 – Domain 6, Non-Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3089

Variable	*M*	*SD*	1	2	3	4	5
Facility Quietness Predictor Value	59.81	9.258	.021	.034	-.070	.026	.073
1. Faith Based	.20	.402	-	-.237	-.063	-.080	-.078
2. For Profit	.20	.399		-	-.080	.102	-.062
3. Academic	.03	.180			-	.062	-.074
4. Safety Net	.25	.433				-	-.019
5. Sole Provider	.14	.344					-

Table 292 – Domain 6, Non-Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.785	(-.321, 1.891)	.034	1.830	.067
Fort Profit	.888	(-.227, 2.003)	.038	2.052	.040
Academic	-3.140	(-5.538, -.743)	-.061	-3.376	.001
Safety Net	.635	(-.361, 1.631)	.030	1.644	.100
Sole Provider	1.994	(.739, 3.249)	.074	4.094	.000

Table 293 – Domain 6, Non-Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
59.148	HCAHPS© Score = 59.148 + .785(Faith Based) + .888(For Profit) – 3.140(Academic) + .635(Safety Net) + 1.994(Sole Provider)	.012	.011	.000

Table 294 – Domain 6, Response Rate Low: Means, Standard Deviations, and Intercorrelations, n = 122 (No Baldrige coded 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Facility Quietness Predictor Value	57.56	10.718	.081	-.087	.017	.037	.	-.025	-.145	.223
1. Faith Based	.12	.330	-	-.204	-.092	.015	.	-.048	-.044	.085
2. For Profit	.23	.422		-	-.135	-.135	.	-.070	-.082	-.154
3. Academic	.06	.234			-	-.061	.	-.032	.081	-.070
4. Most Wired™	.06	.234				-	.	-.032	.081	-.070
5. Baldrige	.00	.000					-			
6. MAGNET™	.02	.128						-	.043	-.036
7. Safety Net	.90	.299							-	.093
8. Sole Provider	.07	.262								-

Table 295 – Domain 6, Response Rate Low: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	1.568	(-6.305, 9.442)	.048	.522	.603
For Profit	-1.012	(-7.354, 5.329)	-.040	-.418	.677
Academic	2.326	(-8.746, 13.397)	.051	.550	.583
Most Wired™	2.959	(-8.036, 13.954)	.064	.705	.482
MAGNET™	-.460	(-20.327, 19.406)	-.005	-.061	.952
Safety Net	-6.366	(-14.896, 2.164)	-.178	-1.955	.053
Sole Provider	9.691	(-.150, 19.533)	.237	2.580	.011

Table 296 – Domain 6, Response Rate Low: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
62.326	HCAHPS© Score = 62.326 + 1.568(Faith Based) – 1.012(For Profit) + 2.326(Academic) + 2.959(Most Wired™) - .460(MAGNET™) – 6.366(Safety Net) + 9.691(Sole Provider)	.089	.034	.142

Table 297 – Domain 6, Response Rate Medium: Means, Standard Deviations, and Intercorrelations, n = 1530

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Facility Quietness	59.56	9.134	.006	.006	-.064	-.036	-.010	-.052	.022	.099
Predictor Value										
1. Faith Based	.20	.398	-	-.232	-.069	-.004	.012	.083	-.069	-.111
2. For Profit	.20	.401		-	-.102	.021	-.045	-.139	.091	-.036
3. Academic	.05	.209			-	.118	-.019	.242	.032	-.084
4. Most Wired™	.19	.392				-	-.005	.162	-.099	-.110
5. Baldrige	.01	.088					-	.042	-.015	-.034
6. MAGNET™	.10	.306						-	-.104	-.099
7. Safety Net	.33	.471							-	-.008
8. Sole Provider	.13	.334								-

Table 298 - Domain 6, Response Rate Low: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.392	(-1.184, 1.967)	.017	.641	.522
For Profit	.071	(-1.498, 1.641)	.003	.117	.907
Academic	-2.073	(-5.083, .937)	-.047	-1.776	.076
Most Wired™	-.314	(-1.887, 1.259)	-.013	-.515	.607
Baldrige	-.615	(-7.430, 6.199)	-.006	-.233	.816
MAGNET™	-.817	(-2.892, 1.258)	-.027	-1.016	.310
Safety Net	.398	(-.896, 1.692)	.021	.794	.428
Sole Provider	2.534	(.702, 4.366)	.093	3.567	.000

Table 299 – Domain 6, Response Rate Medium: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
59.258	HCAHPS© Score = 59.258 + .392(Faith Based) + .071(For Profit) – 2.073(Academic) - .314(Most Wired™) - .615(Baldrige) - .817(MAGNET™) + .398(Safety Net) + 2.534(Sole Provider)	.015	.010	.004

Table 300 – Domain 6, Response Rate High: Means, Standard Deviations, and Intercorrelations, n = 1437

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Facility Quietness Predictor Value	60.27	9.225	.026	.077	-.088	-.108	.011	-.117	.131	.031
1. Faith Based	.21	.411	-	-.244	-.047	-.064	.046	.021	-.071	-.059
2. For Profit	.19	.396		-	-.042	.064	-.051	-.130	.148	-.080
3. Academic	.02	.136			-	.085	.036	.189	.051	-.058
4. Most Wired™	.20	.399				-	.035	.129	-.082	-.093
5. Baldrige	.01	.102					-	.112	.009	-.024
6. MAGNET™	.12	.321						-	-.070	-.105
7. Safety Net	.11	.309							-	.005
8. Sole Provider	.15	.358								-

Table 301 – Domain 6, Response Rate High: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.968	(-.590, 2.525)	.043	1.602	.109
For Profit	1.538	(-.106, 3.182)	.066	2.413	.016
Academic	-4.535	(-9.180, .110)	-.067	-2.518	.012
Most Wired™	-1.916	(-3.493, -.340)	-.083	-3.136	.002
Baldrige	2.370	(-3.730, 8.469)	.026	1.002	.317
MAGNET™	-2.274	(-4.275, -.274)	-.079	-2.932	.003
Safety Net	3.425	(1.398, 5.453)	.115	4.357	.000
Sole Provider	.492	(-1.255, 2.239)	.019	.726	.468

Table 302 – Domain 6, Response Rate High: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
60.023	HCAHPS© Score = 60.023 +.968(Faith Based) + 1.538(For Profit) – 4.535(Academic) – 1.916(Most Wired™) + 2.370(Baldrige) – 2.274(MAGNET™) + 3.425(Safety Net) + .492(Sole Provider)	.046	.041	.000

Table 303 – Domain 6, Region 1: Means, Standard Deviations, and Intercorrelations, n = 131 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Facility Quietness Predictor Value	53.25	6.561	.157	-.231	-.082	-.065	.	.070	.061	.011
1. Faith Based	.11	.310	-	-.009	-.082	-.134	.	.068	-.054	-.099
2. For Profit	.15	.361		-	-.101	.063	.	-.175	.101	-.042
3. Academic	.05	.226			-	.027	.	.095	.119	-.068
4. Most Wired™	.24	.427				-	.	.128	-.153	-.092
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.353						-	-.087	-.037
7. Safety Net	.12	.329							-	-.107
8. Sole Provider	.08	.267								-

Table 304 – Domain 6, Region 1: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	3.148	(-1.718, 8.014)	.149	1.693	.093
For Profit	-4.409	(-8.604, -.213)	-.243	-2.749	.007
Academic	-3.173	(-9.837, 3.491)	-.109	-1.246	.215
Most Wired™	-.209	(-3.807, 3.388)	-.014	-.152	.879
MAGNET™	.747	(-3.557, 5.050)	.040	.454	.651
Safety Net	2.186	(-2.461, 6.834)	.110	1.231	.221
Sole Provider	.492	(-5.145, 6.129)	.020	.229	.820

Table 305 – Domain 6, Region 1: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
53.395	HCAHPS© Score = 53.395 + 3.148(Faith Based) – 4.409(For Profit) – 3.173(Academic) - .209(Most Wired™) + .747(MAGNET™) + 2.186(Safety Net) + .492(Sole Provider)	.099	.048	.071

Table 306 – Domain 6, Region 2: Means, Standard Deviations, and Intercorrelations, n = 208

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Facility Quietness Predictor Value	51.51	5.742	-.171	.113	.001	.034	.017	.175	-.017	-.010
1. Faith Based	.13	.332	-	-.080	-.098	-.026	-.037	.032	-.041	-.109
2. For Profit	.04	.204		-	-.055	-.017	-.021	-.046	.026	-.061
3. Academic	.06	.243			-	.183	-.025	.072	.061	-.075
4. Most Wired™	.14	.347				-	-.040	.254	-.096	-.012
5. Baldrige	.01	.098					-	.075	-.061	-.028
6. MAGNET™	.20	.399						-	-.146	-.143
7. Safety Net	.28	.450							-	-.099
8. Sole Provider	.08	.267								-

Table 307 – Domain 6, Region 2: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-2.954	(-6.084, .177)	-.171	-2.454	.015
For Profit	3.005	(-2.039, 8.048)	.107	1.549	.123
Academic	-.495	(-4.823, 3.832)	-.021	-.298	.766
Most Wired™	-.216	(-3.311, 2.878)	-.013	-.182	.856
Baldrige	-.136	(-10.634, 10.361)	-.002	-.034	.973
MAGNET™	2.751	(.042, 5.461)	.191	2.641	.009
Safety Net	.026	(-2.300, 2.351)	.002	.029	.977
Sole Provider	.076	(-3.856, 4.007)	.004	.050	.960

Table 308 – Domain 6, Region 2: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
51.261	HCAHPS© Score = 51.261 – 2.954(Faith Based) + 3.005(For Profit) - .495(Academic) - .216(Most Wired™) - .136(Baldrige) + 2.751(MAGNET™) + .026(Safety Net) + .076(Sole Provider)	.074	.037	.049

Table 309 – Domain 6, Region 3: Means, Standard Deviations, and Intercorrelations, n = 294 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Facility Quietness Predictor Value	56.13	6.396	.133	.109	-.092	.007	.	-.031	.157	.114
1. Faith Based	.10	.294	-	-.142	-.031	.092	.	.030	.254	-.074
2. For Profit	.16	.367		-	-.029	-.184	.	-.128	-.053	.032
3. Academic	.06	.234			-	.093	.	.310	.100	-.085
4. Most Wired™	.30	.459				-	.	.234	-.108	-.079
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.354						-	-.093	-.079
7. Safety Net	.15	.357							-	.011
8. Sole Provider	.11	.308								-

Table 310 – Domain 6, Region 3: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	2.479	(-.902, 5.861)	.114	1.901	.058
For Profit	2.427	(-.221, 5.074)	.139	2.377	.018
Academic	-2.813	(-7.122, 1.496)	-.103	-1.693	.092
Most Wired™	.704	(-1.463, 2.870)	.050	.842	.400
MAGNET™	.483	(-2.422, 3.388)	.027	.431	.667
Safety Net	2.732	(-.067, 5.532)	.153	2.531	.012
Sole Provider	2.373	(-.721, 5.467)	.114	1.989	.048

Table 311 – Domain 6, Region 3: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
54.727	HCAHPS© Score = 54.727 + 2.479(Faith Based) + 2.427(For Profit) – 2.813(Academic) + .704(Most Wired™) + .483(MAGNET™) + 2.732(Safety Net) + 2.373(Sole Provider)	.076	.054	.002

Table 312 – Domain 6, Region 4: Means, Standard Deviations, and Intercorrelations, n = 682

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Facility Quietness	64.92	7.983	.020	-.179	-.047	-.134	.038	-.107	.265	.116
Predictor Value										
1. Faith Based	.16	.369	-	-.278	-.045	-.032	.050	.084	-.096	-.090
2. For Profit	.31	.463		-	-.107	.184	-.036	-.170	.007	-.060
3. Academic	.02	.156			-	.066	-.009	.254	.009	-.056
4. Most Wired™	.19	.393				-	.043	.015	-.155	-.109
5. Baldrige	.00	.054					-	-.015	-.038	-.019
6. MAGNET™	.07	.253						-	-.116	-.058
7. Safety Net	.33	.469							-	.159
8. Sole Provider	.11	.311								-

Table 313 – Domain 6, Region 4: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.024	(-2.152, 2.103)	-.001	-.030	.976
For Profit	-3.220	(-4.961, -1.479)	-.187	-4.778	.000
Academic	-1.914	(-6.904, 3.075)	-.037	-.991	.322
Most Wired™	-1.108	(-3.073, .857)	-.055	-1.456	.146
Baldrige	6.180	(-7.616, 19.975)	.042	1.157	.248
MAGNET™	-3.043	(-6.139, .054)	-.097	-2.538	.011
Safety Net	4.081	(2.442, 5.720)	.240	6.433	.000
Sole Provider	1.387	(-1.064, 3.838)	.054	1.462	.144

Table 314 – Domain 6, Region 4: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
64.887	HCAHPS© Score = 64.887 - .024(Faith Based) – 3.220(For Profit) – 1.914(Academic) – 1.108(Most Wired™) + 6.180(Baldrige) – 3.043(MAGNET™) + 4.081(Safety Net) + 1.387(Sole Provider)	.124	.114	.000

Table 315 – Domain 6, Region 5: Means, Standard Deviations, and Intercorrelations, n = 526

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Facility Quietness Predictor Value	59.56	7.067	-.060	.054	-.072	-.023	-.010	-.103	.000	-.009
1. Faith Based	.28	.449	-	-.176	-.050	-.021	-.043	.008	-.050	-.081
2. For Profit	.07	.262		-	-.047	-.070	-.035	-.079	.101	-.075
3. Academic	.03	.161			-	.083	-.021	.193	-.015	-.058
4. Most Wired™	.17	.375				-	-.015	.247	-.048	-.027
5. Baldrige	.02	.123					-	.120	.011	-.043
6. MAGNET™	.15	.359						-	-.069	-.045
7. Safety Net	.10	.299							-	-.054
8. Sole Provider	.11	.311								-

Table 316 – Domain 6, Region 5: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.917	(-2.734, .901)	-.058	-1.304	.193
For Profit	.911	(-2.218, 4.040)	.034	.753	.452
Academic	-2.499	(-7.563, 2.565)	-.057	-1.276	.203
Most Wired™	.088	(-2.110, 2.286)	.005	.104	.918
Baldrige	-.105	(-6.684, 6.474)	-.002	-.041	.967
MAGNET™	-1.803	(-4.155, .548)	-.092	-1.983	.048
Safety Net	-.337	(-3.027, 2.353)	-.014	-.324	.746
Sole Provider	-.444	(-3.037, 2.148)	-.020	-.443	.658

Table 317 – Domain 6, Region 5: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
60.153	HCAHPS© Score = 60.153 - .917(Faith Based) + .911(For Profit) – 2.499(Academic) + .088(Most Wired™) - .105(Baldrige) – 1.803(MAGNET™) - .337(Safety Net) - .444(Sole Provider)	.019	.004	.270

Table 318 – Domain 6, Region 6: Means, Standard Deviations, and Intercorrelations, n = 484 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Facility Quietness Predictor Value	66.62	7.927	-.063	-.077	-.101	-.113	.	-.102	-.113	-.030
1. Faith Based	.24	.429	-	-.333	-.069	.149	.	.219	-.185	-.140
2. For Profit	.28	.451		-	-.081	.052	.	-.056	.063	-.145
3. Academic	.03	.168			-	.157	.	.153	.105	-.087
4. Most Wired™	.13	.332				-	.	.250	.006	-.160
5. Baldrige	.00	.000					-			
6. MAGNET™	.07	.249						-	-.075	-.134
7. Safety Net	.35	.478							-	-.007
8. Sole Provider	.20	.402								-

Table 319 – Domain 6, Region 6: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-2.288	(-4.712, .136)	-.124	-2.441	.015
For Profit	-2.336	(-4.559, -.113)	-.133	-2.718	.007
Academic	-4.412	(-10.091, 1.267)	-.093	-2.009	.045
Most Wired™	-1.659	(-4.568, 1.250)	-.070	-1.475	.141
MAGNET™	-2.312	(-6.219, 1.595)	-.073	-1.530	.127
Safety Net	-2.041	(-3.992, -.090)	-.123	-2.706	.007
Sole Provider	-1.893	(-4.268, .482)	-.096	-2.062	.040

Table 320 – Domain 6, Region 6: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
69.426	HCAHPS© Score = 69.426 – 2.288(Faith Based) – 2.336(For Profit) – 4.412(Academic) – 1.659(Most Wired™) – 2.312(MAGNET™) – 2.041(Safety Net) – 1.83	.059	.046	.000

Table 321 – Domain 6, Region 7: Means, Standard Deviations, and Intercorrelations, n = 172

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Facility Quietness Predictor Value	61.92	6.832	.068	.067	-.095	.040	-.022	-.088	.104	-.117
1. Faith Based	.34	.474	-	-.280	-.002	-.058	.251	.052	-.046	-.161
2. For Profit	.13	.341		-	-.075	.188	-.087	-.016	.060	.027
3. Academic	.03	.184			-	.168	.108	.256	.054	-.117
4. Most Wired™	.17	.375				-	.048	.059	.081	-.102
5. Baldrige	.05	.211					-	.019	.030	-.073
6. MAGNET™	.10	.299						-	-.102	-.116
7. Safety Net	.09	.283							-	-.051
8. Sole Provider	.27	.447								-

Table 322 – Domain 6, Region 7: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	1.283	(-1.836, 4.403)	.089	1.072	.285
For Profit	1.449	(-2.796, 5.693)	.072	.889	.375
Academic	-3.389	(-11.252, 4.474)	-.091	-1.123	.263
Most Wired™	.602	(-3.172, 4.377)	.033	.416	.678
Baldrige	-1.278	(-7.979, 5.422)	-.040	-.497	.620
MAGNET™	-1.669	(-6.424, 3.086)	-.073	-.915	.362
Safety Net	2.249	(-2.624, 7.122)	.093	1.203	.231
Sole Provider	-1.814	(-4.945, 1.317)	-.119	-1.510	.133

Table 323 – Domain 6, Region 7: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
61.833	HCAHPS© Score = 61.833 + 1.283(Faith Based) + 1.449(For Profit) – 3.389(Academic) + .602(Most Wired™) – 1.278(Baldrige) – 1.669(MAGNET™) + 2.249(Safety Net) – 1.814(Sole Provider)	.052	.005	.357

Table 324 - Domain 6, Region 8: Means, Standard Deviations, and Intercorrelations, n = 121

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Facility Quietness Predictor Value	60.44	9.837	-.027	-.010	.052	-.016	-.004	-.005	-.268	-.084
1. Faith Based	.21	.412	-	-.210	-.048	-.146	-.048	.115	-.130	-.094
2. For Profit	.20	.400		-	-.045	.233	-.045	-.085	-.123	-.153
3. Academic	.01	.091			-	-.063	-.008	.289	-.023	-.068
4. Most Wired™	.32	.469				-	-.063	-.034	-.095	-.216
5. Baldrige	.01	.091					-	.289	-.023	-.068
6. MAGNET™	.09	.289						-	-.078	-.235
7. Safety Net	.06	.234							-	-.036
8. Sole Provider	.36	.481								-

Table 325 – Domain 6, Region 8: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-2.360	(-8.358, 3.637)	-.099	-1.031	.305
For Profit	-1.917	(-8.115, 4.282)	-.078	-.810	.420
Academic	4.553	(-22.335, 31.440)	.042	.444	.658
Most Wired™	-1.556	(-6.819, 3.707)	-.074	-.775	.440
Baldrige	-1.447	(-28.335, 25.440)	-.013	-.141	.888
MAGNET™	-2.388	(-11.506, 6.760)	-.070	-.686	.494
Safety Net	-12.895	(-23.097, -2.692)	-.307	-3.312	.001
Sole Provider	-3.013	(-8.226, 2.200)	-.147	-1.515	.133

Table 326 – Domain 6, Region 8: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
63.835	HCAHPS© Score = 63.835 – 2.360(Faith Based) – 1.917(For Profit) + 4.553(Academic) – 1.556(Most Wired™) – 1.447(Baldrige) – 2.388(MAGNET™) – 12.895(Safety Net) – 3.013(Sole Provider)	.102	.038	.136

Table 327 – Domain 6, Region 9: Means, Standard Deviations, and Intercorrelations, n = 364

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Facility Quietness Predictor Value	51.74	8.002	-.015	-.040	-.004	.034	.137	.102	-.244	.111
1. Faith Based	.18	.381	-	-.265	-.092	-.118	-.055	-.038	-.009	-.060
2. For Profit	.25	.432		-	-.115	-.121	-.068	-.175	.191	-.079
3. Academic	.04	.193			-	.082	-.024	.195	.152	-.060
4. Most Wired™	.20	.397				-	.121	.098	-.207	-.148
5. Baldrige	.01	.117					-	.133	-.018	-.035
6. MAGNET™	.09	.280						-	-.056	-.091
7. Safety Net	.48	.500							-	-.147
8. Sole Provider	.08	.275								-

Table 328 – Domain 6, Region 9: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.208	(-2.732, 3.149)	.010	.184	.854
For Profit	.741	(-1.934, 3.416)	.040	.717	.474
Academic	1.331	(-4.412, 7.075)	.032	.600	.549
Most Wired™	-.457	(-3.280, 2.366)	-.023	-.419	.675
Baldrige	9.010	(-.159, 18.178)	.131	2.545	.011
MAGNET™	2.383	(-1.555, 6.321)	.083	1.567	.118
Safety Net	-3.848	(-6.098, -1.597)	-.241	-4.428	.000
Sole Provider	2.628	(-1.345, 6.600)	.090	1.713	.088

Table 329 – Domain 6, Region 9: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
52.850	HCAHPS© Score = 52.850 + .208(Faith Based) + .741(For Profit) + 1.331(Academic) - .457(Most Wired™) + 9.010(Baldrige) + 2.383(MAGNET™) – 3.848(Safety Net) + 2.6298(Sole Provider)	.092	.072	.000

Table 330 – Domain 6, Region 10: Means, Standard Deviations, and Intercorrelations, n = 107

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Facility Quietness	55.31	7.863	-.119	.067	.009	-.111	-.078	-.051	.014	.019
Predictor Value										
1. Faith Based	.31	.464	-	-.270	-.065	-.139	-.065	.016	-.159	-.069
2. For Profit	.14	.349		-	-.039	.083	-.039	-.122	.041	-.028
3. Academic	.01	.097			-	-.038	-.009	.321	-.033	-.042
4. Most Wired™	.13	.339				-	-.038	-.018	.051	-.017
5. Baldrige	.01	.097					-	.321	.287	-.042
6. MAGNET™	.08	.279						-	.008	-.132
7. Safety Net	.10	.305							-	-.063
8. Sole Provider	.16	.367								-

Table 331 – Domain 6, Region 10: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-2.199	(-6.903, 2.505)	-.130	-1.228	.222
For Profit	.820	(-5.328, 6.969)	.036	.351	.727
Academic	.175	(-22.422, 22.772)	.002	.020	.984
Most Wired™	-3.178	(-9.293, 2.938)	-.137	-1.365	.175
Baldrige	-7.493	(-31.113, 16.126)	-.092	-.833	.407
MAGNET™	-.489	(-8.863, 7.885)	-.017	-.153	.878
Safety Net	.668	(-6.451, 7.788)	.026	.247	.806
Sole Provider	.088	(-5.565, 5.741)	.004	.041	.967

Table 332 – Domain 6, Region 10: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
56.314	HCAHPS© Score = 56.314 – 2.199(Faith Based) + .820(For Profit) + .175(Academic) – 3.178(Most Wired™) – 7.493(Baldrige) - .489(MAGNET™) + .668(Safety Net) + .088(Sole Provider)	.042	-.037	.829

APPENIDIX O – MULTIPLE REGRESSION ANALYSIS, DOMAIN 7 – MEDICATION EDUCATION

Table 333 – Domain 7: All Variables: Means, Standard Deviations, and Intercorrelations, N = 3083

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Medication Education Predictor Value	63.25	5.590	.030	-.188	-.023	-.016	.030	.026	-.133	.112
1. Faith Based	.20	.402	-	-.237	-.063	-.030	.031	.053	-.079	-.078
2. For Profit	.20	.399		-	-.080	.036	-.047	-.133	.101	-.061
3. Academic	.03	.181			-	.094	.002	.203	.063	-.074
4. Most Wired™	.19	.391				-	.017	.147	-.103	-.098
5. Baldrige	.01	.093					-	.080	-.014	-.027
6. MAGNET™	.11	.309						-	-.102	-.098
7. Safety Net	.25	.432							-	-.017
8. Sole Provider	.14	.344								-

Table 334 – Domain 7: All Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.206	(-.859, .447)	-.015	-.813	.416
For Profit	-2.427	(-3.090, -1.763)	-.173	-9.429	.000
Academic	-.744	(-2.190, .702)	-.024	-1.326	.185
Most Wired™	-.169	(-.829, .490)	-.012	-.662	.508
Baldrige	1.357	(-1.360, 4.073)	.023	1.287	.198
MAGNET™	.126	(-.730, .981)	.007	.379	.705
Safety Net	-1.464	(-2.059, -.869)	-.113	-6.345	.000
Sole Provider	1.577	(.830, 2.323)	.097	5.443	.000

Table 335 – Domain 7: All Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
63.949	HCAHPS© Score = 63.949 - .206(Faith Based) – 2.427(For Profit) - .744(Academic) - .169(Most Wired™) + 1.357(Baldrige) + .126(MAGNET™) – 1.464(Safety Net) + 1.577(Sole Provider)	.060	.057	.000

Table 336 – Domain 7, Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3083

Variable	*M*	*SD*	1	2	3
Medication Education	63.25	5.590	-.016	.030	.026
Predictor Value					
1. Most Wired™	.19	.391	-	.017	.147
2. Baldrige	.01	.093		-	.080
3. MAGNET™	.11	.309			-

Table 337 – Domain 7, Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Most Wired™	-.298	(-.969, .372)	-.021	-1.147	.251
Baldrige	1.660	(-1.133, 4.453)	.028	1.532	.126
MAGNET™	.494	(-.357, 1.345)	.027	1.497	.134

Table 338 – Domain 7, Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
63.234	HCAHPS© Score = 63.234 - .298(Most Wired™) + 1.660(Baldrige) + .494(MAGNET™)	.002	.001	.122

Table 339 – Domain 7, Non-Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3083

Variable	*M*	*SD*	1	2	3	4	5
Medication Education Predictor Value	63.25	5.590	.030	-.188	-.023	-.133	.112
1. Faith Based	.20	.402	-	-.237	-.063	-.079	-.078
2. For Profit	.20	.399		-	-.080	.101	-.061
3. Academic	.03	.181			-	.063	-.074
4. Safety Net	.25	.432				-	-.017
5. Sole Provider	.14	.344					-

Table 340 – Domain 7, Non-Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.193	(-.845, .459)	-.014	-.764	.445
For Profit	-2.458	(-3.116, -1.800)	-.176	-9.626	.000
Academic	-.739	(-2.152, .675)	-.024	-1.347	.178
Safety Net	-1.458	(-2.046, -.870)	-.113	-6.390	.000
Sole Provider	1.574	(.833, 2.314)	.097	5.476	.000

Table 341 – Domain 7, Non-Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
63.945	HCAHPS© Score = 63.945 - .193(Faith Based) – 2.458(For Profit) - .739(Academic) – 1.458(Safety Net) + 1.574(Sole Provider)	.059	.057	.000

Table 342 – Domain 7, Response Rate Low: Means, Standard Deviations, and Intercorrelations , n = 120 (No Baldrige coded 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Medication Education Predictor Value	57.89	7.006	.161	-.072	-.017	.065	.	.002	-.065	.281
1. Faith Based	.13	.332	-	-.204	-.094	.013	.	-.049	-.042	.084
2. For Profit	.23	.419		-	-.134	-.134	.	-.070	-.086	-.153
3. Academic	.06	.235			-	-.062	.	-.032	.083	-.071
4. Most Wired™	.06	.235				-	.	-.032	.083	-.071
5. Baldrige	.00	.000					-			
6. MAGNET™	.02	.129						-	.043	-.037
7. Safety Net	.90	.301							-	.095
8. Sole Provider	.08	.264								-

Table 343 – Domain 7, Response Rate Low: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	2.922	(-2.162, 8.005)	.138	1.506	.135
For Profit	.203	(-3.949, 4.356)	.012	.128	.898
Academic	1.006	(-6.142, 8.153)	.034	.369	.713
Most Wired™	2.874	(-4.223, 9.971)	.097	1.061	.291
MAGNET™	1.577	(-11.239, 14.393)	.029	.322	.748
Safety Net	-2.272	(-7.782, 3.237)	-.098	-1.081	.282
Sole Provider	7.706	(1.353, 14.058)	.291	3.179	.002

Table 344 – Domain 7, Response Rate Low: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
58.695	HCAHPS© Score = 58.695 + 2.922(Faith Based) + .203(For Profit) + 1.006(Academic) + 2.874(Most Wired™) + 1.577(MAGNET™) – 2.272(Safety Net) + 7.706(Sole Provider)	.115	.060	.051

Table 345 – Domain 7, Response Rate Medium: Means, Standard Deviations, and Intercorrelations, n = 1529

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Medication Education Predictor Value	62.5 1	5.563	.048	-.235	.005	-.010	.018	.048	-.068	.114
1. Faith Based	.20	.398	-	-.231	-.069	-.004	.012	.083	-.069	-.112
2. For Profit	.20	.400		-	-.102	.022	-.044	-.139	.089	-.036
3. Academic	.05	.209			-	.118	-.019	.242	.032	-.084
4. Most Wired™	.19	.392				-	-.005	.162	-.098	-.111
5. Baldrige	.01	.088					-	.042	-.015	-.034
6. MAGNET™	.10	.306						-	-.104	-.100
7. Safety Net	.33	.471							-	-.005
8. Sole Provider	.13	.335								-

Table 346 – Domain 7, Response Rate Medium: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.037	(-.896, .970)	.003	.103	.918
For Profit	-3.109	(-4.039, -2.179)	-.224	-8.620	.000
Academic	-.360	(-2.142, 1.421)	-.014	-.522	.602
Most Wired™	.006	(-.925, .937)	.000	.016	.987
Baldrige	.641	(-3.393, 4.674)	.010	.410	.682
MAGNET™	.468	(-.760, 1.696)	.026	.983	.326
Safety Net	-.517	(-1.283, .249)	-.044	-1.740	.082
Sole Provider	1.797	(.715, 2.880)	.108	4.282	.000

Table 347 – Domain 7, Response Rate Medium: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
63.028	HCAHPS© Score = 63.028 + .037(Faith Based) – 3.109(For Profit) - .360(Academic) + .006(Most Wired™) + .641(Baldrige) + .468(MAGNET™) - .517(Safety Net) + 1.797(Sole Provider)	.069	.064	.000

Table 348 – Domain 7, Response Rate High: Means, Standard Deviations, and Intercorrelations, n = 1434

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Medication Education Predictor Value	64.47	5.065	-.025	-.154	-.022	-.066	.032	-.027	.027	.079
1. Faith Based	.21	.411	-	-.245	-.047	-.065	.046	.021	-.071	-.059
2. For Profit	.20	.397		-	-.042	.063	-.051	-.130	.149	-.080
3. Academic	.02	.136			-	.085	.036	.189	.052	-.058
4. Most Wired™	.20	.399				-	.035	.128	-.082	-.092
5. Baldrige	.01	.102					-	.112	.009	-.024
6. MAGNET™	.12	.322						-	-.070	-.105
7. Safety Net	.11	.309							-	.006
8. Sole Provider	.15	.358								-

Table 349 – Domain 7, Response Rate High: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.818	(-1.677, .041)	-.066	-2.456	.014
For Profit	-2.205	(-3.112, -1.298)	-.173	-6.272	.000
Academic	-.848	(-3.407, 1.712)	-.023	-.854	.393
Most Wired™	-.589	(-1.458, .280)	-.046	-1.748	.081
Baldrige	1.675	(-1.686, 5.037)	.034	1.286	.199
MAGNET™	-.520	(-1.622, .583)	-.033	-1.215	.224
Safety Net	.703	(-.418, 1.824)	.043	1.617	.106
Sole Provider	.744	(-.221, 1.709)	.053	1.989	.047

Table 350 – Domain 7, Response Rate High: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
65.070	HCAHPS© Score = 65.070 - .818(Faith Based) – 2.205(For Profit) - .848(Academic) - .589(Most Wired™) + 1.675(Baldrige) - .520(MAGNET™) + .703(Safety Net) + .744(Sole Provider)	.039	.034	.000

Table 351 – Domain 7, Region 1: Means, Standard Deviations, and Intercorrelations, n = 131 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Medication Education Predictor Value	64.00	4.108	-.157	-.218	.050	.066	.	.085	-.011	.077
1. Faith Based	.11	.310	-	-.009	-.082	-.134	.	.068	-.054	-.099
2. For Profit	.15	.361		-	-.101	.063	.	-.175	.101	-.042
3. Academic	.05	.226			-	.027	.	.095	.119	-.068
4. Most Wired™	.24	.427				-	.	.128	-.153	-.092
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.353						-	-.087	-.037
7. Safety Net	.12	.329							-	-.107
8. Sole Provider	.08	.267								-

Table 352 – Domain 7, Region 1: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-1.930	(-5.003, 1.143)	-.146	-1.643	.103
For Profit	-2.414	(-5.064, .236)	-.212	-2.384	.019
Academic	.209	(-4.000.4.418)	.011	.130	.897
Most Wired™	.596	(-1.676, 2.868)	.062	.687	.494
MAGNET™	.614	(-2.104, 3.332)	.053	.591	.555
Safety Net	.273	(-2.662, 3.209)	.022	.244	.808
Sole Provider	.996	(-2.564, 4.557)	.065	.732	.465

Table 353 – Domain 7, Region 1: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
64.224	HCAHPS© Score = 64.224 – 1.930(Faith Based) – 2.414(For Profit) + .209(Academic) + .596(Most Wired™) + .614(MAGNET™) + .273(Safety Net) + .996(Sole Provider)	.083	.031	.145

Table 354 – Domain 7, Region 2: Means, Standard Deviations, and Intercorrelations, n = 208

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Medication Education	59.78	4.686	-.094	-.081	.025	.093	-.016	.292	-.487	.064
Predictor Value										
1. Faith Based	.13	.332	-	-.080	-.098	-.026	-.037	.032	-.041	-.109
2. For Profit	.04	.204		-	-.055	-.017	-.021	-.046	.026	-.061
3. Academic	.06	.243			-	.183	-.025	.072	.061	-.075
4. Most Wired™	.14	.347				-	-.040	.254	-.096	-.012
5. Baldrige	.01	.098					-	.075	-.061	-.028
6. MAGNET™	.20	.399						-	-.146	-.143
7. Safety Net	.28	.450							-	-.099
8. Sole Provider	.08	.267								-

Table 355 – Domain 7, Region 2: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-1.732	(-3.934, .470)	-.123	-2.045	.042
For Profit	-1.520	(-5.068, 2.027)	-.066	-1.114	.266
Academic	.486	(-2.558, 3.530)	.025	.415	.679
Most Wired™	-.308	(-2.484, 1.869)	-.023	-.368	.713
Baldrige	-3.247	(-10.631, 4.138)	-.068	-1.143	.254
MAGNET™	2.821	(.915, 4.726)	.240	3.849	.000
Safety Net	-4.786	(-6.422, -3.151)	-.459	-7.611	.000
Sole Provider	.613	(-2.153, 3.379)	.035	.576	.565

Table 356 – Domain 7, Region 2: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
60.836	HCAHPS© Score = 60.836 – 1.732(Faith Based) – 1.520(For Profit) + .486(Academic) - .308(Most Wired™) – 3.247(Baldrige) + 2.821(MAGNET™) – 4.786(Safety Net) + .613(Sole Provider)	.312	.285	.000

Table 357 – Domain 7, Region 3: Means, Standard Deviations, and Intercorrelations, n = 294 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Medication Education	61.99	4.342	-.179	-.021	-.023	-.009	.	.105	-.094	.192
Predictor Value										
1. Faith Based	.10	.294	-	-.142	-.031	.092	.	.030	.254	-.074
2. For Profit	.16	.367		-	-.029	-.184	.	-.128	-.053	.032
3. Academic	.06	.234			-	.093	.	.310	.100	-.085
4. Most Wired™	.30	.459				-	.	.234	-.108	-.079
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.354						-	-.093	-.079
7. Safety Net	.15	.357							-	.011
8. Sole Provider	.11	.308								-

Table 358 – Domain 7, Region 3: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-2.420	(-4.705, -.136)	-.164	-2.747	.006
For Profit	-.466	(-2.254, 1.323)	-.039	-.676	.500
Academic	-.921	(-3.832, 1.990)	-.050	-.821	.413
Most Wired™	-.172	(-1.636, 1.291)	-.018	-.305	.761
MAGNET™	1.662	(-.300, 3.624)	.136	2.197	.029
Safety Net	-.498	(-2.389, 1.393)	-.041	-.682	.496
Sole Provider	2.638	(.548, 4.728)	.187	3.272	.001

Table 359 – Domain 7, Region 3: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
61.956	HCAHPS© Score = 61.956 – 2.420(Faith Based) - .466(For Profit) - .921(Academic) - .172(Most Wired™) + 1.662(MAGNET™) - .498(Safety Net) + 2.638(Sole Provider)	.085	.063	.001

Table 360 – Domain 7, Region 4: Means, Standard Deviations, and Intercorrelations n = 682

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Medication Education Predictor Value	63.84	5.792	.121	-.343	.008	-.124	.039	.025	.092	.111
1. Faith Based	.16	.369	-	-.278	-.045	-.032	.050	.084	-.096	-.090
2. For Profit	.31	.463		-	-.107	.184	-.036	-.170	.007	-.060
3. Academic	.02	.156			-	.066	-.009	.254	.009	-.056
4. Most Wired™	.19	.393				-	.043	.015	-.155	-.109
5. Baldrige	.00	.054					-	-.015	-.038	-.019
6. MAGNET™	.07	.253						-	-.116	-.058
7. Safety Net	.33	.469							-	.159
8. Sole Provider	.11	.311								-

Table 361 – Domain 7, Region 4: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.688	(-.844, 2.219)	.044	1.160	.246
For Profit	-4.033	(-5.286, -2.780)	-.322	-8.313	.000
Academic	-.537	(-4.129, 3.054)	-.014	-.386	.699
Most Wired™	-.631	(-2.046, .783)	-.043	-1.153	.249
Baldrige	3.323	(-6.607, 13.253)	.031	.864	.388
MAGNET™	-.330	(-2.559, 1.899)	-.014	-.383	.702
Safety Net	.975	(-.205, 2.154)	.079	2.135	.033
Sole Provider	1.445	(-.319, 3.209)	.078	2.116	.035

Table 362 – Domain 7, Region 4: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
64.649	HCAHPS© Score = 64.649 + .688(Faith Based) – 4.033(For Profit) - .537(Academic) - .631(Most Wired™) 3.323(Baldrige) - .330(MAGNET™) + .975(Safety Net)	.138	.128	.000

Table 363 – Domain 7, Region 5: Means, Standard Deviations, and Intercorrelations, n = 524

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Medication Education	63.87	4.903	-.056	-.118	-.051	.072	.003	-.005	-.253	.084
Predictor Value										
1. Faith Based	.28	.450	-	-.175	-.051	-.022	-.043	.007	-.047	-.082
2. For Profit	.07	.260		-	-.046	-.068	-.035	-.078	.082	-.074
3. Academic	.03	.161			-	.083	-.021	.193	-.014	-.058
4. Most Wired™	.17	.376				-	-.015	.246	-.046	-.027
5. Baldrige	.02	.123					-	.120	.012	-.044
6. MAGNET™	.15	.360						-	-.068	-.046
7. Safety Net	.10	.297							-	-.053
8. Sole Provider	.11	.312								-

Table 364 – Domain 7, Region 5: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.909	(-2.123, .305)	-.083	-1.935	.054
For Profit	-2.053	(-4.162, .057)	-.109	-2.515	.012
Academic	-1.826	(-5.206, 1.554)	-.060	-1.397	.163
Most Wired™	.860	(-.607, 2.327)	.066	1.515	.130
Baldrige	.186	(-4.205, 4.577)	.005	.110	.913
MAGNET™	-.444	(-2.014, 1.126)	-.033	-.731	.465
Safety Net	-4.057	(-5.865, -2.249)	-.245	-5.801	.000
Sole Provider	.838	(-.892, 2.569)	.053	1.252	.211

Table 365 – Domain 7, Region 5: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
64.549	64.549 - .909(Faith Based) – 2.053(For Profit) – 1.826(Academic) + .860(Most Wired™) + .186(Baldrige) - .444(MAGNET™) – 4.057(Safety Net) + .838(Sole Provider)	.092	.078	.000

Table 366 – Domain 7, Region 6: Means, Standard Deviations, and Intercorrelations, n = 483 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Medication Education Predictor Value	64.83	6.450	.015	-.185	-.032	-.030	.	-.039	-.136	.140
1. Faith Based	.24	.429	-	-.334	-.069	.149	.	.219	-.184	-.141
2. For Profit	.28	.451		-	-.081	.051	.	-.057	.065	-.146
3. Academic	.03	.168			-	.157	.	.152	.105	-.087
4. Most Wired™	.13	.333				-	.	.250	.007	-.161
5. Baldrige	.00	.000					-			
6. MAGNET™	.07	.249						-	-.074	-.134
7. Safety Net	.35	.478							-	-.005
8. Sole Provider	.20	.403								-

Table 367 – Domain 7, Region 6: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.803	(-2.768, 1.162)	-.053	-1.057	.291
For Profit	-2.642	(-4.445, -.839)	-.185	-3.789	.000
Academic	-.961	(-5.564, 3.642)	-.025	-.540	.590
Most Wired™	.325	(-2.033, 2.682)	.017	.356	.722
MAGNET™	-.904	(-4.070, 2.263)	-.035	-.738	.461
Safety Net	-1.792	(-3.376, -208)	-.133	-2.927	.004
Sole Provider	1.609	(-.317, 3.535)	.100	2.161	.031

Table 368 – Domain 7, Region 6: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
66.121	HCAHPS© Score = 66.121 - .803(Faith Based) – 2.642(For Profit) - .961(Academic) + .325(Most Wired™) - .904(MAGNET™) – 1.792(Safety Net) + 1.609(Sole Provider)	.067	.053	.000

Table 369 – Domain 7, Region 7: Means, Standard Deviations, and Intercorrelations, n = 172

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Medication Education Predictor Value	63.72	4.635	-.004	-.212	-.043	-.060	.061	-.026	-.061	-.019
1. Faith Based	.34	.474	-	-.280	-.002	-.058	.251	.052	-.046	-.161
2. For Profit	.13	.341		-	-.075	.188	-.087	-.016	.060	.027
3. Academic	.03	.184			-	.168	.108	.256	.054	-.117
4. Most Wired™	.17	.375				-	.048	.059	.081	-.102
5. Baldrige	.05	.211					-	.019	.030	-.073
6. MAGNET™	.10	.299						-	-.102	-.116
7. Safety Net	.09	.283							-	-.051
8. Sole Provider	.27	.447								-

Table 370 – Domain 7, Region 7: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.927	(-3.033, 1.178)	-.095	-1.148	.253
For Profit	-3.138	(-6.002, -.273)	-.231	-2.855	.005
Academic	-1.579	(-6.886, 3.727)	-.063	-.776	.439
Most Wired™	-.158	(-2.705, 2.389)	-.013	-.162	.871
Baldrige	1.578	(-2.944, 6.100)	.072	.910	.364
MAGNET™	-.291	(-3.500, 2.917)	-.019	-.237	.813
Safety Net	-.871	(-4.159, 2.418)	-.053	-.690	.491
Sole Provider	-.372	(-2.484, 1.741)	-.036	-.459	.647

Table 371 – Domain 7, Region 7: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
64.662	HCAHPS© Score = 64.662 - .927(Faith Based) – 3.138(For Profit) – 1.579 (Academic) - .158(Most Wired™) + 1.578(Baldrige) - .291(MAGNET™) – .871(Safety Net) - .372(Sole Provider)	.062	.016	.227

Table 372 – Domain 7, Region 8: Means, Standard Deviations, and Intercorrelations, n = 119

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Medication Education Predictor Value	64.66	7.243	-.006	-.125	.004	.077	.004	-.013	-.330	-.002
1. Faith Based	.22	.415	-	-.215	-.049	-.153	-.049	.112	-.122	-.093
2. For Profit	.20	.403		-	-.046	.229	-.046	-.088	-.116	-.152
3. Academic	.01	.092			-	-.064	-.008	.288	-.021	-.068
4. Most Wired™	.33	.471				-	-.064	-.037	-.079	-.216
5. Baldrige	.01	.092					-	.288	-.021	-.068
6. MAGNET™	.09	.291						-	-.074	-.236
7. Safety Net	.05	.220							-	-.009
8. Sole Provider	.35	.480								-

Table 373 – Domain 7, Region 8: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-1.444	(-5.742, 2.854)	-.083	-.881	.380
For Profit	-3.827	(-8.265, .611)	-.213	-2.260	.026
Academic	.086	(-19.153, 19.325)	.001	.012	.991
Most Wired™	1.126	(-2.647, 4.899)	.073	.782	.436
Baldrige	.086	(-19.153, 19.325)	.001	.012	.991
MAGNET™	-1.434	(-7.958, 5.091)	-.058	-.576	.566
Safety Net	-11.985	((-19.778, -4.192)	-.364	-4.031	.000
Sole Provider	-.652	(-4.408, 3.103)	-.043	-.455	.650

Table 374 – Domain 7, Region 8: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
66.348	HCAHPS© Score = 66.348 – 1.444(Faith Based) – 3.827(For Profit) + .086(Academic) + 1.126(Most Wired™) + .086(Baldrige) – 1.434(MAGNET™) – 11.985(Safety Net) - .652(Sole Provider)	.154	.092	.016

Table 375 – Domain 7, Region 9: Means, Standard Deviations, and Intercorrelations, n = 363

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Medication Education	61.15	5.270	.128	-.355	.008	.083	.131	.120	-.300	.046
Predictor Value										
1. Faith Based	.18	.382	-	-.264	-.093	-.119	-.055	-.038	-.007	-.060
2. For Profit	.25	.431		-	-.114	-.120	-.067	-.174	.187	-.078
3. Academic	.04	.193			-	.082	-.024	.195	.153	-.060
4. Most Wired™	.20	.397				-	.120	.098	-.206	-.148
5. Baldrige	.01	.117					-	.133	-.018	-.035
6. MAGNET™	.09	.280						-	-.055	-.092
7. Safety Net	.48	.500							-	-.146
8. Sole Provider	.08	.276								-

Table 376 – Domain 7, Region 9: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.832	(.987, 2.651)	.060	1.184	.237
For Profit	-3.395	(-5.055, -1.736)	-.278	-5.299	.000
Academic	.393	(-3.160, 3.947)	.014	.287	.775
Most Wired™	-.170	(-1.916, 1.576)	-.013	-.252	.801
Baldrige	4.843	(-.829, 10.515)	.107	2.211	.028
MAGNET™	.841	(-1.595, 3.277)	.045	.894	.372
Safety Net	-2.621	(-4.014, -1.228)	-.249	-4.873	.000
Sole Provider	-.023	(-2.480, 2.435)	-.001	-.024	.981

Table 377 – Domain 7, Region 9: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
62.971	HCAHPS© Score = 62.971 + .832(Faith Based) – 3.395(For Profit) + .393(Academic) – 1.70(Most Wired™) + 4.843(Baldrige) + .841(MAGNET™) – 2.621(Safety Net) - .023(Sole Provider)	.199	.181	.000

Table 378 – Domain 7, Region 10: Means, Standard Deviations, and Intercorrelations, n = 107

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Medication Education	63.24	4.459	-.214	-.095	.082	-.227	.126	.105	.085	-.001
Predictor Value										
1. Faith Based	.31	.464	-	-.270	-.065	-.139	-.065	.016	-.159	-.069
2. For Profit	.14	.349		-	-.039	.083	-.039	-.122	.041	-.028
3. Academic	.01	.097			-	-.038	-.009	.321	-.033	-.042
4. Most Wired™	.13	.339				-	-.038	-.018	.051	-.017
5. Baldrige	.01	.097					-	.321	.287	-.042
6. MAGNET™	.08	.279						-	.008	-.132
7. Safety Net	.10	.305							-	-.063
8. Sole Provider	.16	.367								-

Table 379 – Domain 7, Region 10: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-2.654	(-5.167, -.141)	-.276	-2.774	.007
For Profit	-1.791	(-5.076, 1.493)	-.140	-1.433	.155
Academic	1.532	(-10.539, 13.603)	.033	.333	.740
Most Wired™	-3.315	(-6.582, -.048)	-.252	-2.665	.009
Baldrige	2.924	(-9.693, 15.542)	.063	.609	.544
MAGNET™	.872	(-3.602, 5.346)	.055	.512	.610
Safety Net	.608	(-3.195, 4.411)	.042	.420	.676
Sole Provider	-.171	(-3.191, 2.848)	-.014	-.149	.882

Table 380 – Domain 7, Region 10: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
64.596	HCAHPS© Score = 64.596 – 2.654(Faith Based) – 1.791(For Profit) + 1.532(Academic) – 3.315(Most Wired™) + 2.924(Baldrige) + .872(MAGNET™) + .608(Safety Net) - .171(Sole Provider)	.150	.080	.037

APPENIDIX P – MULTIPLE REGRESSION ANALYSIS, DOMAIN 8 – DISHCARGE INSTRUCTIONS

Table 381 – Domain 8, All Variables: Means, Standard Deviations, and Intercorrelations, N = 3086

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Discharge Instructions	85.63	4.013	.096	-.164	.004	.108	.043	.115	-.364	.058
Predictor Value										
1. Faith Based	.20	.402	-	-.237	-.063	-.030	.031	.053	-.079	-.079
2. For Profit	.20	.400		-	-.080	.036	-.047	-.133	.103	-.062
3. Academic	.03	.180			-	.094	.002	.203	.063	-.074
4. Most Wired™	.19	.391				-	.017	.147	-.103	-.098
5. Baldrige	.01	.093					-	.080	-.014	-.027
6. MAGNET™	.11	.309						-	-.102	-.098
7. Safety Net	.25	.433							-	-.018
8. Sole Provider	.14	.344								-

Table 382 – Domain 8, All Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.470	(.028, .912)	.047	2.740	.006
For Profit	-1.087	(-1.536, -.638)	-.108	-6.243	.000
Academic	.117	(-.862, 1.096)	.005	.308	.758
Most Wired™	.774	(.327, 1.220)	.075	4.464	.000
Baldrige	1.212	(-.627, 3.051)	.028	1.698	.090
MAGNET™	.726	(.146, 1.305)	.056	3.228	.001
Safety Net	-3.101	(-3.503, -2.698)	-.334	-19.861	.000
Sole Provider	.730	(.225, 1.235)	.063	3.724	.000

Table 383 – Domain 8, All Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
86.186	HCAHPS© Score = 86.186 + .470(Faith Based) – 1.087(For Profit) + .117(Academic) + .774(Most Wired™) + 1.212(Baldrige) + .726(MAGNET™) – 3.101(Safety Net) + .730(Sole Provider)	.163	.161	.000

Table 384 – Domain 8, Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3086

Variable	*M*	*SD*	1	2	3
Discharge Instructions	85.63	4.013	.108	.043	.115
Predictor Value					
1. Most Wired™	.19	.391	-	.017	.147
2. Baldrige	.01	.093		-	.080
3. MAGNET™	.11	.309			-

Table 385 – Domain 8, Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Baldrige	.949	(.473, 1.426)	.092	5.138	.000
MAGNET™	1.458	(-.525, 3.442)	.034	1.895	.058
Most Wired™	1.285	(.681, 1.889)	.099	5.480	.000

Table 386 – Domain 8, Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
85.301	HCAHPS© Score = 85.301 + .949(Baldrige) + 1.458(MAGNET™) + 1.285(Most Wired™)	.023	.022	.000

Table 387 – Domain 8, Non-Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3086

Variable	*M*	*SD*	1	2	3	4	5
Discharge Instructions Predictor Value	85.63	4.013	.096	-.164	.004	-.364	.058
1. Faith Based	.20	.402	-	-.237	-.063	-.079	-.079
2. For Profit	.20	.400		-	-.080	.103	-.062
3. Academic	.03	.180			-	.063	-.074
4. Safety Net	.25	.433				-	-.018
5. Sole Provider	.14	.344					-

Table 388 – Domain 8, Non-Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.466	(.021, .910)	.047	2.702	.007
For Profit	-1.127	(-1.575, -.679)	-.112	-6.487	.000
Academic	.519	(-.444, 1.482)	.023	1.390	.165
Safety Net	-3.239	(-3.639, -2.838)	-.349	-20.859	.000
Sole Provider	.580	(.076, 1.084)	.050	2.966	.003

Table 389 – Domain 8, Non-Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
86.470	HCAHPS© Score = 86.470 + .466(Faith Based) – 1.127(For Profit) + .519(Academic) – 3.239(Safety Net) + .580(Sole Provider)	.153	.151	.000

Table 390 – Domain 8, Response Rate Low: Means, Standard Deviations, and Intercorrelations, n = 121 (No Baldrige coded 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Discharge Instructions Predictor Value	78.36	6.897	.075	.009	.101	.173	.	.031	.037	.150
1. Faith Based	.12	.331	-	-.206	-.093	.014	.	-.049	-.043	.085
2. For Profit	.23	.423		-	-.136	-.136	.	-.071	-.080	-.156
3. Academic	.06	.234			-	-.061	.	-.032	.082	-.070
4. Most Wired™	.06	.234				-	.	-.032	.082	-.070
5. Baldrige	.00	.000					-			
6. MAGNET™	.02	.128						-	.043	-.037
7. Safety Net	.90	.300							-	.094
8. Sole Provider	.07	.263								-

Table 391 – Domain 8, Response Rate Low: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	2.022	(-3.050, 7.094)	.097	1.044	.298
For Profit	1.821	(-2.270, 5.912)	.112	1.166	.246
Academic	4.499	(-2.632, 11.631)	.153	1.653	.101
Most Wired™	6.210	(-.870, 13.291)	.211	2.298	.023
MAGNET™	3.356	(-9.431, 16.144)	.062	.688	.493
Safety Net	.004	(-5.487, 5.496)	.000	.002	.998
Sole Provider	4.907	(-1.431, 11.245)	.187	2.028	.045

Table 392 – Domain 8, Response Rate Low: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
76.639	HCAHPS© Score = 76.639 + 2022(Faith Based) + 1.821(For Profit) + 4.499(Academic) + 6.210(Most Wired™) + 3.356(MAGNET™) + .004(Safety Net) + 4.907(Sole Provider)	.090	.034	.142

Table 393 – Domain 8, Response Rate Medium: Means, Standard Deviations, and Intercorrelations, n = 1530

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Discharge Instructions	84.72	3.585	.105	-.201	.047	.103	.036	.137	-.248	.027
Predictor Value										
1. Faith Based	.20	.398	-	-.232	-.069	-.004	.012	.083	-.070	-.112
2. For Profit	.20	.401		-	-.102	.021	-.045	-.139	.090	-.037
3. Academic	.05	.209			-	.118	-.019	.242	.032	-.084
4. Most Wired™	.19	.392				-	-.005	.162	-.099	-.111
5. Baldrige	.01	.088					-	.042	-.015	-.034
6. MAGNET™	.10	.306						-	-.105	-.099
7. Safety Net	.33	.471							-	-.006
8. Sole Provider	.13	.335								-

Table 394 - Domain 8, Response Rate Medium: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.483	(-.104, 1.071)	.054	2.121	.034
For Profit	-1.398	(-1.983, -.812)	-.156	-6.159	.000
Academic	.330	(-.792, 1.453)	.019	.760	.448
Most Wired™	.693	(.107, 1.280)	.076	3.050	.002
Baldrige	.975	(-1.565, 3.516)	.024	.990	.322
MAGNET™	.870	(.096, 1.644)	.074	2.900	.004
Safety Net	-1.633	(-2.116, -1.151)	-.215	-8.737	.000
Sole Provider	.478	(-.204, 1.159)	.045	1.807	.071

Table 395 – Domain 8, Response Rate Medium: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
85.146	HCAHPS© Score = 85.146(Faith Based) – 1.398(For Profit) + .330(Academic) + .693(Most Wired™) + .975(Baldrige) + .870(MAGNET™) – 1.633(Safety Net) + .478(Sole Provider)	.111	.106	.000

Table 396 – Domain 8, Response Rate High: Means, Standard Deviations, and Intercorrelations, n = 1435

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Discharge Instructions Predictor Value	87.21	3.020	.068	-.194	.011	.075	.045	.074	-.229	.041
1. Faith Based	.21	.411	-	-.245	-.047	-.065	.046	.021	-.070	-.060
2. For Profit	.20	.396		-	-.042	.063	-.051	-.130	.151	-.080
3. Academic	.02	.136			-	.085	.036	.189	.052	-.058
4. Most Wired™	.20	.399				-	.035	.128	-.081	-.093
5. Baldrige	.01	.102					-	.112	.009	-.024
6. MAGNET™	.12	.322						-	-.069	-.105
7. Safety Net	.11	.308							-	.006
8. Sole Provider	.15	.358								-

Table 397 – Domain 8, Response Rate High: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.162	(-.337, .661)	.022	.838	.402
For Profit	-1.171	(-1.698, -.644)	-.154	-5.731	.000
Academic	.117	(-1.371, 1.604)	.005	.203	.839
Most Wired™	.519	(.014, 1.024)	.069	2.650	.008
Baldrige	.983	(-.971, 2.936)	.033	1.297	.195
MAGNET™	.289	(-.352, .929)	.031	1.162	.245
Safety Net	-1.934	(-2.587, -1.281)	-.197	-7.636	.000
Sole Provider	.354	(-.206, .913)	.042	1.630	.103

Table 398 – Domain 8, Response Rate High: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
87.405	HCAHPS© Score = 87.405 + .162(Faith Based) – 1.171(For Profit) + .117(Academic) + .519(Most Wired™) + .983(Baldrige) + .289(MAGNET™) - 1.934(Safety Net) + .354(Sole Provider)	.087	.082	.000

Table 399 – Domain 8, Region 1: Means, Standard Deviations, and Intercorrelations, n = 131 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Discharge Instructions Predictor Value	87.66	2.633	-.030	-.122	.096	.052	.	.128	.013	-.127
1. Faith Based	.11	.310	-	-.009	-.082	-.134	.	.068	-.054	-.099
2. For Profit	.15	.361		-	-.101	.063	.	-.175	.101	-.042
3. Academic	.05	.226			-	.027	.	.095	.119	-.068
4. Most Wired™	.24	.427				-	.	.128	-.153	-.092
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.353						-	-.087	-.037
7. Safety Net	.12	.329							-	-.107
8. Sole Provider	.08	.267								-

Table 400 – Domain 8, Region 1: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.341	(-2.346, 1.664)	-.040	-.445	.657
For Profit	-.787	(-2.515, .942)	-.108	-1.191	.236
Academic	.714	(-2.032, 3.459)	.061	.680	.498
Most Wired™	.187	(-1.295, 1.669)	.030	.331	.742
MAGNET™	.740	(-1.034, 2.513)	.099	1.091	.277
Safety Net	.119	(-1.795, 2.034)	.015	.163	.871
Sole Provider	-1.216	(-3.538, 1.107)	-.123	-1.369	.173

Table 401 – Domain 8, Region 1: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
87.702	HCAHPS© Score = 87.702 - .341(Faith Based) - .787(For Profit) + .714(Academic) + .187(Most Wired™) + .740(MAGNET™) + .119(Safety Net) – 1.216(Sole Provider)	.050	-.004	.484

Table 402 – Domain 8, Region 2: Means, Standard Deviations, and Intercorrelations, n = 208

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Discharge Instructions Predictor Value	83.25	4.366	.058	-.132	.035	.025	.119	.241	-.516	.178
1. Faith Based	.13	.332	-	-.080	-.098	-.026	-.037	.032	-.041	-.109
2. For Profit	.04	.204		-	-.055	-.017	-.021	-.046	.026	-.061
3. Academic	.06	.243			-	.183	-.025	.072	.061	-.075
4. Most Wired™	.14	.347				-	-.040	.254	-.096	-.012
5. Baldrige	.01	.098					-	.075	-.061	-.028
6. MAGNET™	.20	.399						-	-.146	-.143
7. Safety Net	.28	.450							-	-.099
8. Sole Provider	.08	.267								-

Table 403 – Domain 8, Region 2: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.689	(-1.310, 2.688)	.052	.896	.371
For Profit	-1.952	(-5.172, 1.269)	-.091	-1.576	.117
Academic	1.425	(-1.339, 4.188)	.079	1.341	.181
Most Wired™	-1.012	(-2.988, .964)	-.080	-1.332	.184
Baldrige	3.504	(-3.200, 10.208)	.079	1.359	.176
MAGNET™	2.171	(.441, 3.901)	.198	3.263	.001
Safety Net	-4.598	(-6.082, -3.113)	-.473	-8.053	.000
Sole Provider	2.728	(.217, 5.239)	.167	2.825	.005

Table 404 – Domain 8, Region 2: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
83.911	HCAHPS© Score = 83.911 + .689(Faith Based) – 1.952(For Profit) + 1.425(Academic) – 1.012(Most Wired™) + 3.504(Baldrige) + 2.171(MAGNET™) – 4.598(Safety Net) + 2.728(Sole Provider)	.347	.321	.000

Table 405 – Domain 8, Region 3: Means, Standard Deviations, and Intercorrelations, n = 294 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Discharge Instructions Predictor Value	86.03	3.154	-.091	-.048	-.025	.159	.	.180	-.182	.050
1. Faith Based	.10	.294	-	-.142	-.031	.092	.	.030	.254	-.074
2. For Profit	.16	.367		-	-.029	-.184	.	-.128	-.053	.032
3. Academic	.06	.234			-	.093	.	.310	.100	-.085
4. Most Wired™	.30	.459				-	.	.234	-.108	-.079
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.354						-	-.093	-.079
7. Safety Net	.15	.357							-	.011
8. Sole Provider	.11	.308								-

Table 406 – Domain 8, Region 3: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.810	(-2.469, .849)	-.076	-1.266	.206
For Profit	-.225	(-1.524, 1.074)	-.026	-.449	.654
Academic	-.979	(-3.093, 1.134)	-.073	-1.202	.231
Most Wired™	.829	(-.234, 1.891)	.121	2.022	.044
MAGNET™	1.479	(.055, 2.904)	.166	2.693	.008
Safety Net	-1.144	(-2.517, .229)	-.130	-2.160	.032
Sole Provider	.647	(.871, 2.164)	.063	1.105	.270

Table 407 – Domain 8, Region 3: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
85.836	HCAHPS© Score = 85.836 - .810(Faith Based) - .225(For Profit) - .979(Academic) + .829(Most Wired™) + 1.479(MAGNET™) – 1.144(Safety Net) + .647(Sole Provider)	.086	.063	.001

Table 408 – Domain 8, Region 4: Means, Standard Deviations, and Intercorrelations, n = 681

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Discharge Instructions Predictor Value	84.73	3.774	.147	-.236	.044	.071	.011	.127	-.141	-.003
1. Faith Based	.16	.370	-	-.278	-.045	-.032	.050	.084	-.095	-.090
2. For Profit	.31	.463		-	-.107	.184	-.036	-.170	.008	-.060
3. Academic	.02	.156			-	.066	-.009	.253	.009	-.056
4. Most Wired™	.19	.393				-	.043	.015	-.154	-.110
5. Baldrige	.00	.054					-	-.015	-.038	-.019
6. MAGNET™	.07	.254						-	-.115	-.058
7. Safety Net	.33	.469							-	.160
8. Sole Provider	.11	.311								-

Table 409 – Domain 8, Region 4: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.766	(-.257, 1.789)	.075	1.933	.054
For Profit	-1.786	(-2.624, -.948)	-.219	-5.508	.000
Academic	.048	(-2.351, 2.447)	.002	.052	.959
Most Wired™	.938	(-.007, 1.883)	.098	2.563	.011
Baldrige	-.522	(-7.155, 6.111)	-.007	-.203	.839
MAGNET™	1.042	(-.447, 2.531)	.070	1.807	.071
Safety Net	-.905	(-1.695, -.116)	-.113	-2.964	.003
Sole Provider	.276	(-.903, 1.455)	.023	.604	.546

Table 410 – Domain 8, Region 4: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
85.170	HCAHPS© Score = 85.170 + .766(Faith Based) – 1.786(For Profit) + .048(Academic) + .938(Most Wired™) - .522(Baldrige) + 1.042(MAGNET™) - .905(Safety Net) + .276(Sole Provider)	.094	.084	.000

Table 411 – Domain 8, Region 5: Means, Standard Deviations, and Intercorrelations, n = 526

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Discharge Instructions	87.14	3.867	.027	-.123	-.043	.073	-.033	.064	-.419	.086
Predictor Value										
1. Faith Based	.28	.449	-	-.176	-.050	-.021	-.043	.008	-.050	-.081
2. For Profit	.07	.262		-	-.047	-.070	-.035	-.079	.101	-.075
3. Academic	.03	.161			-	.083	-.021	.193	-.015	-.058
4. Most Wired™	.17	.375				-	-.015	.247	-.048	-.027
5. Baldrige	.02	.123					-	.120	.011	-.043
6. MAGNET™	.15	.359						-	-.069	-.045
7. Safety Net	.10	.299							-	-.054
8. Sole Provider	.11	.311								-

Table 412 – Domain 8, Region 5: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.054	(-.956, .848)	-.006	-.154	.877
For Profit	-1.135	(-2.688, .418)	-.077	-1.890	.059
Academic	-1.468	(-3.981, 1.045)	-.061	-1.510	.132
Most Wired™	.465	(-.625, 1.556)	.045	1.103	.271
Baldrige	-1.070	(-4.334, 2.195)	-.034	-.847	.397
MAGNET™	.403	(-.764, 1.570)	.037	.892	.373
Safety Net	-5.236	(-6.571, -3.901)	-.405	-10.143	.000
Sole Provider	.689	(-.598, 1.975)	.055	1.384	.167

Table 413 – Domain 8, Region 5: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
87.596	HCAHPS© Score = 87.596 - .054(Faith Based) – 1.135(For Profit) – 1.468(Academic) + .465(Most Wired™) – 1.070(Baldrige) + .403(MAGNET™) – 5.236(Safety Net) + .689(Sole Provider)	.193	.181	.000

Table 414 – Domain 8, Region 6: Means, Standard Deviations, and Intercorrelations, n = 484 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Discharge Instructions Predictor Value	84.9 9	3.664	.072	-.009	.037	.081	.	.044	-.330	.031
1. Faith Based	.24	.429	-	-.333	-.069	.149	.	.219	-.185	-.140
2. For Profit	.28	.451		-	-.081	.052	.	-.056	.063	-.145
3. Academic	.03	.168			-	.157	.	.153	.105	-.087
4. Most Wired™	.13	.332				-	.	.250	.006	-.160
5. Baldrige	.00	.000					-			
6. MAGNET™	.07	.249						-	-.075	-.134
7. Safety Net	.35	.478							-	-.007
8. Sole Provider	.20	.402								-

Table 415 – Domain 8, Region 6: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.192	(-.891, 1.274)	.022	.458	.647
For Profit	.237	(-.756, 1.229)	.029	.617	.538
Academic	1.530	(-1.006, 4.066)	.070	1.561	.119
Most Wired™	.853	(.446, 2.152)	.077	1.697	.090
MAGNET™	-.110	(-1.855, 1.634)	-.007	-.164	.870
Safety Net	-2.572	(-3.443, -1.701)	-.336	-7.635	.000
Sole Provider	.485	(-.576, 1.546)	.053	1.183	.238

Table 416 – Domain 8, Region 6: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
85.544	HCAHPS© Score = 85.544 + .192(Faith Based) + .237(For Profit) + 1.530(Academic) + .853(Most Wired™) - .110(MAGNET™) – 2.572(Safety Net) + .485(Sole Provider)	.122	.109	.000

Table 417 – Domain 8, Region 7: Means, Standard Deviations, and Intercorrelations, n = 172

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Discharge Instructions	87.35	3.885	.034	-.124	.056	.112	.059	.212	-.395	-.065
Predictor Value										
1. Faith Based	.34	.474	-	-.280	-.002	-.058	.251	.052	-.046	-.161
2. For Profit	.13	.341		-	-.075	.188	-.087	-.016	.060	.027
3. Academic	.03	.184			-	.168	.108	.256	.054	-.117
4. Most Wired™	.17	.375				-	.048	.059	.081	-.102
5. Baldrige	.05	.211					-	.019	.030	-.073
6. MAGNET™	.10	.299						-	-.102	-.116
7. Safety Net	.09	.283							-	-.051
8. Sole Provider	.27	.447								-

Table 418 – Domain 8, Region 7: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.352	(-1.956, 1253)	-.043	-.571	.569
For Profit	-1.507	(-3.690, .675)	-.132	-1.800	.074
Academic	-.225	(-4.268, 3.819)	-.011	-.145	.885
Most Wired™	1.553	(-.388, 3.493)	.150	2.085	.039
Baldrige	1.037	(-2.409, 4.482)	.056	.784	.434
MAGNET™	2.061	(-.384, 4.506)	.159	2.196	.029
Safety Net	-5.334	(-7.840, -2.829)	-.389	-5.548	.000
Sole Provider	-.450	(-2.060, 1.159)	-.052	-.729	.467

Table 419 – Domain 8, Region 7: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
87.751	HCAHPS© Score = 87.751 - .352(Faith Based) – 1.507(For Profit) - .225(Academic) + 1.553(Most Wired™) + 1.037(Baldrige) + 2.061(MAGNET™) – 5.334(Safety Net) - .450(Sole Provider)	.225	.187	.000

Table 420 – Domain 8, Region 8: Means, Standard Deviations, and Intercorrelations, n = 119

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Discharge Instructions	87.92	5.374	.163	.003	-.033	.241	-.016	.026	-.628	.027
Predictor Value										
1. Faith Based	.22	.415	-	-.215	-.049	-.153	-.049	.112	-.122	-.101
2. For Profit	.20	.403		-	-.046	.229	-.046	-.088	-.116	-.160
3. Academic	.01	.092			-	-.064	-.008	.288	-.021	-.069
4. Most Wired™	.33	.471				-	-.064	-.037	-.079	-.227
5. Baldrige	.01	.092					-	.288	-.021	-.069
6. MAGNET™	.09	.291						-	-.074	-.240
7. Safety Net	.05	.220							-	-.013
8. Sole Provider	.36	.482								-

Table 421 – Domain 8, Region 8: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	1.472	(-1.081, 4.026)	.114	1.511	.134
For Profit	-1.190	(-3.826, 1.445)	-.089	-1.184	.239
Academic	-1.328	(-12.732, 10.076)	-.023	-.305	.761
Most Wired™	2.783	(.540, 5.026)	.244	3.252	.002
Baldrige	-.328	(-11.732, 11.076)	-.006	-.075	.940
MAGNET™	-.097	(-3.969, 3.774)	-.005	-.066	.948
Safety Net	-14.810	(-19.432, -10.187)	-.605	-8.398	.000
Sole Provider	.761	(-1.471, 2.992)	.068	.893	.374

Table 422 – Domain 8, Region 8: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
87.425	HCAHPS© Score = 87.425 + 1.472(Faith Based) – 1.190(For Profit) – 1.328(Academic) + 2.783(Most Wired™) - .328(Baldrige) - .097(MAGNET™) – 14.810(Safety Net) + .761(Sole Provider)	.460	.421	.000

Table 423 – Domain 8, Region 9: Means, Standard Deviations, and Intercorrelations, n = 364

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Discharge Instructions Predictor Value	84.18	3.853	.114	-.319	-.020	.181	.142	.088	-.427	.036
1. Faith Based	.18	.381	-	-.265	-.092	-.118	-.055	-.038	-.009	-.060
2. For Profit	.25	.432		-	-.115	-.121	-.068	-.175	.191	-.079
3. Academic	.04	.193			-	.082	-.024	.195	.152	-.060
4. Most Wired™	.20	.397				-	.121	.098	-.207	-.148
5. Baldrige	.01	.117					-	.133	-.018	-.035
6. MAGNET™	.09	.280						-	-.056	-.091
7. Safety Net	.48	.500							-	-.147
8. Sole Provider	.08	.275								-

Table 424 – Domain 8, Region 9: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.702	(-.573, 1.978)	.069	1.426	.155
For Profit	-1.890	(-3.050, -.729)	-.212	-4.217	.000
Academic	.267	(-2.225, 2.758)	.013	.277	.782
Most Wired™	.661	(-.563, 1.886)	.068	1.398	.163
Baldrige	3.801	(-.176, 7.778)	.115	2.475	.014
MAGNET™	.098	(-1.610, 1.806)	.007	.149	.882
Safety Net	-2.877	(-3.853, -1.901)	-.374	-7.633	.000
Sole Provider	-.227	(-1.951, 1.496)	-.016	-.342	.733

Table 425– Domain 8, Region 9: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
85.714	HCAHPS© Score = 85.714 + .702(Faith Based) – 1.890(For Profit) + .267(Academic) + .661(Most Wired™) + 3.801(Baldrige) + .098(MAGNET™) – 2.877(Safety Net) - .227(Sole Provider)	.263	.247	.000

Table 426 – Domain 8, Region 10: Means, Standard Deviations, and Intercorrelations, n = 107

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Discharge Instructions	87.53	2.195	-.015	.074	.154	-.082	-.024	.111	-.068	.058
Predictor Value										
1. Faith Based	.31	.464	-	-.270	-.065	-.139	-.065	.016	-.159	-.069
2. For Profit	.14	.349		-	-.039	.083	-.039	-.122	.041	-.028
3. Academic	.01	.097			-	-.038	-.009	.321	-.033	-.042
4. Most Wired™	.13	.339				-	-.038	-.018	.051	-.017
5. Baldrige	.01	.097					-	.321	.287	-.042
6. MAGNET™	.08	.279						-	.008	-.132
7. Safety Net	.10	.305							-	-.063
8. Sole Provider	.16	.367								-

Table 427 – Domain 8, Region 10: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.012	(-1.293, 1.317)	.003	.024	.981
For Profit	.640	(-1.066, 2.346)	.102	.985	.327
Academic	2.787	(-3.483, 9.057)	.123	1.168	.246
Most Wired™	-.526	(-2.223, 1.171)	-.081	-.814	.418
Baldrige	-.858	(-7.411, 5.696)	-.038	-.344	.732
MAGNET™	.826	(-1.498, 3.149)	.105	.934	.353
Safety Net	-.355	(-2.331, 1.620)	-.049	-.472	.638
Sole Provider	.441	(-1.127, 2.010)	.074	.739	.462

Table 428 – Domain 8, Region 10: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
87.387	HCAHPS© Score = 87.387 + .012(Faith Based) + .640(For Profit) + 2.787(Academic) - .526(Most Wired™) - .858(Baldrige) + .826(MAGNET™) - .355(Safety Net) + .441(Sole Provider)	.053	-.024	.700

APPENIDIX Q – MULTIPLE REGRESSION ANALYSIS, DOMAIN 9 – CARE TRANSITIONS

Table 429 – Domain 9, All Variables: Means, Standard Deviations, and Intercorrelations, N = 3088

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Care Transitions Predictor Value	50.65	6.198	.124	-.244	.059	.062	.062	.145	-.266	-.010
1. Faith Based	.20	.402	-	-.237	-.063	-.030	.031	.053	-.080	-.079
2. For Profit	.20	.399		-	-.080	.036	-.047	-.133	.102	-.062
3. Academic	.03	.180			-	.094	.002	.203	.062	-.074
4. Most Wired™	.19	.391				-	.017	.147	-.103	-.098
5. Baldrige	.01	.093					-	.080	-.014	-.027
6. MAGNET™	.11	.309						-	-.103	-.098
7. Safety Net	.25	.433							-	-.019
8. Sole Provider	.14	.344								-

Table 430 – Domain 9, All Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.883	(.189, 1.578)	.057	3.279	.001
For Profit	-2.998	(-3.702, -2.293)	-.193	-10.963	.000
Academic	1.484	(-.054, 3.022)	.043	2.488	.013
Most Wired™	.474	(-.228, 1.176)	.030	1.741	.082
Baldrige	2.735	(-.155, 5.624)	.041	2.439	.015
MAGNET™	1.514	(.604, 2.424)	.075	4.287	.000
Safety Net	-3.337	(-3.969, -2.706)	-.233	-13.620	.000
Sole Provider	-.121	(-.915, .672)	-.007	-.393	.694

Table 431 – Domain 9, All Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
51.596	HCAHPS© Score = 51.596 + .883(Faith Based) – 2.998(For Profit) + 1.484(Academic) + .474(Most Wired™) + 2.735(Baldrige) + 1.514(MAGNET™) – 3.337(Safety Net) - .121(Sole Provider)	.134	.132	.000

Table 432 – Domain 9, Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3089

Variable	*M*	*SD*	1	2	3
Care Transitions Predictor Value	50.65	6.198	.062	.062	.145
1. Baldrige	.19	.391	-	.017	.147
2. MAGNET™	.01	.093		-	.080
3. Most Wired™	.11	.309			-

Table 433 – Domain 9, Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Baldrige	.652	(-.082, 1.387)	.041	2.289	.022
MAGNET™	3.357	(.297, 6.417)	.050	2.828	.005
Most Wired™	2.711	(1.779, 3.643)	.135	7.497	.000

Table 434 – Domain 9, Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
50.210	HCAHPS© Score = 50.210 + .652(Baldrige) + 3.357(MAGNET™) + 2.711(Most Wired™)	.025	.024	.000

Table 435 – Domain 9, Non-Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3089

Variable	*M*	*SD*	1	2	3	4	5
Care Transitions Predictor Value	50.65	6.198	.124	-.244	.059	-.266	-.010
1. Faith Based	.20	.402	-	-.237	-.063	-.080	-.079
2. For Profit	.20	.399		-	-.080	.102	-.062
3. Academic	.03	.180			-	.062	-.074
4. Safety Net	.25	.433				-	-.019
5. Sole Provider	.14	.344					-

Table 436 – Domain 9, Non-Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.909	(.212, 1.606)	.059	3.362	.001
Fort Profit	-3.131	(-3.833, -2.428)	-.202	-11.486	.000
Academic	2.086	(.576, 3.597)	.061	3.559	.000
Safety Net	-3.505	(-4.132, -2.878)	-.245	-14.400	.000
Sole Provider	-.315	(-1.106, .476)	-.017	-1.027	.304

Table 437 – Domain 9, Non-Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
51.940	HCAHPS© Score = 51.940 + .909(Faith Based) 3.131(For Profit) + 2.086(Academic) – 3.505(Safety Net) - .315(Sole Provider)	.125	.124	.000

Table 438 – Domain 9, Response Rate Low: Means, Standard Deviations, and Intercorrelations, n = 122 (No Baldrige coded 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Care Transitions Predictor Value	44.43	7.325	.170	-.091	.048	.203	.	.063	-.003	.241
1. Faith Based	.12	.330	-	-.204	-.092	.015	.	-.048	-.044	.085
2. For Profit	.23	.422		-	-.135	-.135	.	-.070	-.082	-.154
3. Academic	.06	.234			-	-.061	.	-.032	.081	-.070
4. Most Wired™	.06	.234				-	.	-.032	.081	-.070
5. Baldrige	.00	.000					-			
6. MAGNET™	.02	.128						-	.043	-.036
7. Safety Net	.90	.299							-	.093
8. Sole Provider	.07	.262								-

Table 439 – Domain 9, Response Rate Low: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	3.613	(-1.592, 8.817)	.163	1.819	.072
For Profit	.563	(-3.629, 4.755)	.032	.352	.726
Academic	3.382	(-3.936, 10.701)	.108	1.211	.229
Most Wired™	7.438	(.170, 14.705)	.237	2.681	.008
MAGNET™	5.525	(-7.607, 18.657)	.096	1.102	.273
Safety Net	-1.235	(-6.874, 4.403)	-.050	-.574	.567
Sole Provider	7.389	(.884, 13.894)	.265	2.975	.004

Table 440 – Domain 9, Response Rate Low: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
43.710	HCAHPS© Score = 43.710 + 3.613(Faith Based) + .563(For Profit) + 3.382(Academic) + 7.438(Most Wired™) + 5.525(MAGNET™) – 1.235(Safety Net) + 7.389(Sole Provider)	.148	.096	.009

Table 441 – Domain 9, Response Rate Medium: Means, Standard Deviations, and Intercorrelations, n = 1530

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Care Transitions Predictor Value	49.48	5.768	.144	-.328	.133	.057	.067	.176	-.186	-.037
1. Faith Based	.20	.398	-	-.232	-.069	-.004	.012	.083	-.070	-.112
2. For Profit	.20	.401		-	-.102	.021	-.045	-.139	.090	-.037
3. Academic	.05	.209			-	.118	-.019	.242	.032	-.084
4. Most Wired™	.19	.392				-	-.005	.162	-.099	-.111
5. Baldrige	.01	.088					-	.042	-.015	-.034
6. MAGNET™	.10	.306						-	-.105	-.099
7. Safety Net	.33	.471							-	-.006
8. Sole Provider	.13	.335								-

Table 442 - Domain 9, Response Rate Medium: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.954	(.035, 1.873)	.066	2.677	.007
For Profit	-3.999	(-4.914, -3.084)	-.278	-11.269	.000
Academic	2.476	(.722, 4.231)	.090	3.640	.000
Most Wired™	.326	(-.591, 1.243)	.022	.918	.359
Baldrige	3.218	(-.754, 7.191)	.049	2.089	.037
MAGNET™	1.637	(.427, 2.846)	.087	3.489	.000
Safety Net	-1.798	(-2.552, -1.045)	-.147	-6.152	.000
Sole Provider	-.349	(-1.415, .717)	-.020	-.844	.399

Table 443 – Domain 9, Response Rate Medium: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
50.363	HCAHPS© Score = 50.363 + .954(Faith Based) – 3.999(For Profit) + 2.476(Academic) + .326(Most Wired™) + 3.218(Baldrige) + 1.637(MAGNET™) – 1.798(Safety Net) – .349(Sole Provider)	.160	.156	.000

Table 444 – Domain 9, Response Rate High: Means, Standard Deviations, and Intercorrelations n = 1436

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Care Transitions Predictor Value	52.43	5.892	.085	-.190	.023	.029	.053	.102	-.161	-.036
1. Faith Based	.21	.411	-	-.244	-.047	-.064	.046	.021	-.070	-.059
2. For Profit	.19	.396		-	-.042	.064	-.051	-.130	.149	-.080
3. Academic	.02	.136			-	.085	.036	.189	.052	-.058
4. Most Wired™	.20	.399				-	.035	.129	-.081	-.093
5. Baldrige	.01	.102					-	.112	.009	-.024
6. MAGNET™	.12	.322						-	-.070	-.105
7. Safety Net	.11	.309							-	.006
8. Sole Provider	.15	.358								-

Table 445 – Domain 9, Response Rate High: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.486	(-.500, 1.471)	.034	1.271	.204
For Profit	-2.326	(-3.366, -1.285)	-.156	-5.763	.000
Academic	.360	(-2.579, 3.299)	.008	.316	.752
Most Wired™	.260	(-.738, 1.257)	.018	.672	.502
Baldrige	2.088	(-1.772, 5.948)	.036	1.395	.163
MAGNET™	1.110	(-.156, 2.376)	.061	2.261	.024
Safety Net	-2.494	(-3.781, -1.207)	-.131	-4.999	.000
Sole Provider	-.599	(-1.704, .507)	-.036	-1.397	.163

Table 446 – Domain 9, Response Rate High: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
52.929	HCAHPS© Score = 52.929 + .486(Faith Based) – 2.326(For Profit) + .360(Academic) + .260(Most Wired™) + 2.088(Baldrige) + 1.110(MAGNET™) – 2.494(Safety Net) - .599(Sole Provider)	.064	.059	.000

Table 447 – Domain 9, Region 1: Means, Standard Deviations, and Intercorrelations, n = 131 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Care Transitions	52.08	4.699	.057	-.352	.068	-.060	.	.127	.013	.019

Predictor Value										
1. Faith Based	.11	.310	-	-.009	-.082	-.134	.	.068	-.054	-.099
2. For Profit	.15	.361		-	-.101	.063	.	-.175	.101	-.042
3. Academic	.05	.226			-	.027	.	.095	.119	-.068
4. Most Wired™	.24	.427				-	.	.128	-.153	-.092
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.353						-	-.087	-.037
7. Safety Net	.12	.329							-	-.107
8. Sole Provider	.08	.267								-

Table 448 – Domain 9, Region 1: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.780	(-2.632, 4.192)	.051	.598	.551
For Profit	-4.410	(-7.352, -1.468)	-.339	-3.922	.000
Academic	.577	(-4.096, 5.249)	.028	.323	.747
Most Wired™	-.353	(-2.875, 2.169)	-.032	-.366	.715
MAGNET™	.939	(-2.079, 3.956)	.071	.814	.417
Safety Net	.715	(-2.544, 3.974)	.050	.574	.567
Sole Provider	.302	(-3.650, 4.255)	.017	.200	.842

Table 449 – Domain 9, Region 1: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
52.480	HCAHPS© Score = 52.480 + .780(Faith Based) – 4.410(For Profit) + .577(Academic) - .353(Most Wired™) + .939(MAGNET™) + .715(Safety Net) + .302(Sole Provider)	.136	.087	.010

Table 450 – Domain 9, Region 2: Means, Standard Deviations, and Intercorrelations, n = 208

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Care Transitions Predictor Value	46.28	5.355	-.123	-.108	.124	.041	.050	.390	-.410	-.005
1. Faith Based	.13	.332	-	-.080	-.098	-.026	-.037	.032	-.041	-.109
2. For Profit	.04	.204		-	-.055	-.017	-.021	-.046	.026	-.061
3. Academic	.06	.243			-	.183	-.025	.072	.061	-.075
4. Most Wired™	.14	.347				-	-.040	.254	-.096	-.012
5. Baldrige	.01	.098					-	.075	-.061	-.028
6. MAGNET™	.20	.399						-	-.146	-.143
7. Safety Net	.28	.450							-	-.099
8. Sole Provider	.08	.267								-

Table 451 – Domain 9, Region 2: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-2.410	(-4.888, .068)	-.149	-2.529	.012
For Profit	-2.364	(-6.357, 1.628)	-.090	-1.540	.125
Academic	2.700	(-.725, 6.126)	.122	2.050	.042
Most Wired™	-1.751	(-4.201, .698)	-.114	-1.859	.064
Baldrige	-.482	(-8.792, 7.829)	-.009	-.151	.880
MAGNET™	4.768	(2.624, 6.913)	.355	5.782	.000
Safety Net	-4.538	(-6.379, -2.697)	-.381	-6.412	.000
Sole Provider	-.124	(-3.236, 2.989)	-.006	-.103	.918

Table 452 – Domain 9, Region 2: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
47.097	HCAHPS© Score = 47.097 - .2.410(Faith Based) – 2.364(For Profit) + 2.700(Academic) – 1.751(Most Wired™) - .482(Baldrige) + 4.768(MAGNET™) – 4.538(Safety Net) - .124(Sole Provider)	.333	.306	.000

Table 453 – Domain 9, Region 3: Means, Standard Deviations, and Intercorrelations, n = 294 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Care Transitions Predictor Value	49.34	4.484	-.144	-.131	.033	.156	.	.310	-.249	.061
1. Faith Based	.10	.294	-	-.142	-.031	.092	.	.030	.254	-.074
2. For Profit	.16	.367		-	-.029	-.184	.	-.128	-.053	.032
3. Academic	.06	.234			-	.093	.	.310	.100	-.085
4. Most Wired™	.30	.459				-	.	.234	-.108	-.079
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.354						-	-.093	-.079
7. Safety Net	.15	.357							-	.011
8. Sole Provider	.11	.308								-

Table 454 – Domain 9, Region 3: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-1.868	(-4.099, .363)	-.123	-2.171	.031
For Profit	-1.369	(-3.116, .377)	-.112	-2.033	.043
Academic	-.827	(-3.670, 2.016)	-.043	-.754	.451
Most Wired™	.686	(-.743, 2.116)	.070	1.245	.214
MAGNET™	3.621	(1.705, 5.537)	.286	4.901	.000
Safety Net	-2.341	(-4.187, -.494)	-.187	-3.287	.001
Sole Provider	1.191	(-.850, 3.232)	.082	1.513	.131

Table 455 – Domain 9, Region 3: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
49.274	HCAHPS© Score = 49.274 – 1.868(Faith Based) – 1.369(For Profit) - .827(Academic) + .686(Most Wired™) + 3.621(MAGNET™) – 2.341(Safety Net) + 1.191(Sole Provider)	.182	.162	.000

Table 456 – Domain 9, Region 4: Means, Standard Deviations, and Intercorrelations, n = 682

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Care Transitions Predictor Value	50.60	6.107	.213	-.408	.135	-.049	.052	.161	-.100	-.035
1. Faith Based	.16	.369	-	-.278	-.045	-.032	.050	.084	-.096	-.090
2. For Profit	.31	.463		-	-.107	.184	-.036	-.170	.007	-.060
3. Academic	.02	.156			-	.066	-.009	.254	.009	-.056
4. Most Wired™	.19	.393				-	.043	.015	-.155	-.109
5. Baldrige	.00	.054					-	-.015	-.038	-.019
6. MAGNET™	.07	.253						-	-.116	-.058
7. Safety Net	.33	.469							-	.159
8. Sole Provider	.11	.311								-

Table 457 – Domain 9, Region 4: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	1.664	(.108, 3.220)	.101	2.763	.006
For Profit	-4.749	(-6.022, -3.475)	-.360	-9.634	.000
Academic	3.359	(-.290, 7.008)	.086	2.378	.018
Most Wired™	-.043	(-1.480, 1.394)	-.003	-.078	.938
Baldrige	3.698	(-6.391, 13.786)	.033	.947	.344
MAGNET™	1.448	(-.817, 3.713)	.060	1.652	.099
Safety Net	-.992	(-2.190, .207)	-.076	-2.138	.033
Sole Provider	-.527	(-2.319, 1.265)	-.027	-.760	.448

Table 458 – Domain 9, Region 4: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
51.992	HCAHPS© Score = 51.992 + 1.664(Faith Based) – 4.749(For Profit) + 3.359(Academic) - .043(Most Wired™) + 3.698(Baldrige) + 1.448(MAGNET™) - .992(Safety Net) - .527(Sole Provider)	.200	.190	.000

Table 459 – M Domain 9, Region 5: Means, Standard Deviations, and Intercorrelations, n = 526

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Care Transitions Predictor Value	52.25	5.175	.001	-.117	.031	.116	.024	.147	-.308	-.037
1. Faith Based	.28	.449	-	-.176	-.050	-.021	-.043	.008	-.050	-.081
2. For Profit	.07	.262		-	-.047	-.070	-.035	-.079	.101	-.075
3. Academic	.03	.161			-	.083	-.021	.193	-.015	-.058
4. Most Wired™	.17	.375				-	-.015	.247	-.048	-.027
5. Baldrige	.02	.123					-	.120	.011	-.043
6. MAGNET™	.15	.359						-	-.069	-.045
7. Safety Net	.10	.299							-	-.054
8. Sole Provider	.11	.311								-

Table 460 – Domain 9, Region 5: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.372	(-1.629, .885)	-.032	-.766	.444
For Profit	-1.676	(-3.840, .488)	-.085	-2.003	.046
Academic	-.235	(-3.737, 3.267)	-.007	-.174	.862
Most Wired™	.959	(-.561, 2.479)	.070	1.631	.103
Baldrige	.392	(-4.157, 4.942)	.009	.223	.824
MAGNET™	1.443	(-.183, 3.070)	.100	2.295	.022
Safety Net	-5.092	(-6.952, -3.232)	-.294	-7.078	.000
Sole Provider	-.921	(-2.714, .872)	-.055	-1.328	.185

Table 461 – Domain 9, Region 5: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
52.699	HCAHPS© Score = 52.669 - .372(Faith Based) – 1.676(For Profit) - .235(Academic) + .959(Most Wired™) + .392(Baldrige) + 1.443(MAGNET™) – 5.092(Safety Net) - .921(Sole Provider)	.125	.112	.000

Table 462 – Domain 9, Region 6: Means, Standard Deviations, and Intercorrelations, n = 484 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Care Transitions Predictor Value	51.19	6.581	.178	-.210	.078	.049	.	.077	-.242	-.086
1. Faith Based	.24	.429	-	-.333	-.069	.149	.	.219	-.185	-.140
2. For Profit	.28	.451		-	-.081	.052	.	-.056	.063	-.145
3. Academic	.03	.168			-	.157	.	.153	.105	-.087
4. Most Wired™	.13	.332				-	.	.250	.006	-.160
5. Baldrige	.00	.000					-			
6. MAGNET™	.07	.249						-	-.075	-.134
7. Safety Net	.35	.478							-	-.007
8. Sole Provider	.20	.402								-

Table 463 Domain 9, Region 6: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.958	(-.988, 2.904)	.062	1.273	.204
For Profit	-2.664	(-4.448, -.879)	-.183	-3.860	.000
Academic	3.076	(-1.484, 7.635)	.078	1.745	.082
Most Wired™	.422	(-1.913, 2.758)	.021	.468	.640
MAGNET™	.165	(-2.972, 3.303)	.006	.136	.892
Safety Net	-3.134	(-4.700, -1.568)	-.228	-5.175	.000
Sole Provider	-1.545	(-3.452, .362)	-.094	-2.095	.037

Table 464 – Domain 9, Region 6: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
52.975	HCAHPS© Score = 52.975 + .958(Faith Based) – 2.664(For Profit) + 3.076(Academic) + .422(Most Wired™) + .165(MAGNET™) – 3.134(Safety Net) – 1.545(Sole Provider)	.120	.107	.000

Table 465 – Domain 9, Region 7: Means, Standard Deviations, and Intercorrelations, n = 172

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Care Transitions Predictor Value	53.08	5.327	.245	-.256	.009	.046	.096	.168	-.167	-.190
1. Faith Based	.34	.474	-	-.280	-.002	-.058	.251	.052	-.046	-.161
2. For Profit	.13	.341		-	-.075	.188	-.087	-.016	.060	.027
3. Academic	.03	.184			-	.168	.108	.256	.054	-.117
4. Most Wired™	.17	.375				-	.048	.059	.081	-.102
5. Baldrige	.05	.211					-	.019	.030	-.073
6. MAGNET™	.10	.299						-	-.102	-.116
7. Safety Net	.09	.283							-	-.051
8. Sole Provider	.27	.447								-

Table 466 – Domain 9, Region 7: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	1.584	(-685, 3.854)	.141	1.819	.071
For Profit	-3.466	(-6.555, -.378)	-.222	-2.925	.004
Academic	-2.068	(-7.789, 3.654)	-.071	-.942	.348
Most Wired™	1.349	(-1.397, 4.096)	.095	1.281	.202
Baldrige	.877	(-3.998, 5.753)	.035	.469	.640
MAGNET™	2.431	(-1.029, 5.891)	.137	1.831	.069
Safety Net	-2.748	(-6.294, .797)	-.146	-2.020	.045
Sole Provider	-1.780	(-4.058, .498)	-.149	-2.037	.043

Table 467 – Domain 9, Region 7: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
53.294	HCAHPS© Score = 53.294 + 1.584(Faith Based) – 3.466(For Profit) – 2.068(Academic) + 1.349(Most Wired™) + .877(Baldrige) + 2.431(MAGNET™) – 2.748(Safety Net) – 1.780(Sole Provider)	.174	.134	.000

Table 468 – Domain 9, Region 8: Means, Standard Deviations, and Intercorrelations, n = 120

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Care Transitions Predictor Value	53.20	7.853	.093	-.074	.033	.155	.009	.069	-.443	-.106
1. Faith Based	.22	.414	-	-.212	-.048	-.149	-.048	.113	-.131	-.098
2. For Profit	.20	.402		-	-.046	.231	-.046	-.087	-.124	-.156
3. Academic	.01	.091			-	-.064	-.008	.289	-.023	-.069
4. Most Wired™	.33	.470				-	-.064	-.035	-.097	-.222
5. Baldrige	.01	.091					-	.289	-.023	-.069
6. MAGNET™	.09	.290						-	-.079	-.237
7. Safety Net	.06	.235							-	-.038
8. Sole Provider	.36	.482								-

Table 469 – Domain 9, Region 8: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.051	(-4.347, 4.450)	.003	.031	.976
For Profit	-3.509	(-8.049, 1.031)	-.179	-2.026	.045
Academic	1.442	(-18.203, 21.086)	.017	.192	.848
Most Wired™	2.092	(-1.768, 5.953)	.125	1.421	.158
Baldrige	-.558	(-20.203, 19.086)	-.006	-.075	.941
MAGNET™	-.293	(-6.961, 6.375)	-.011	-.115	.908
Safety Net	-15.283	(-22.750, -7.816)	-.458	-5.364	.000
Sole Provider	-2.038	(-5.872, 1.797)	-.125	-1.393	.166

Table 470 – Domain 9, Region 8: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
54.852	HCAHPS© Score = 54.852 + .051(Faith Based) – 3.509(For Profit) + 1.442(Academic) + 2.092(Most Wired™) - .558(Baldrige) - .293(MAGNET™) – 15.283(Safety Net) – 2.038(Sole Provider)	.249	.195	.000

Table 471 – Domain 9, Region 9: Means, Standard Deviations, and Intercorrelations, n = 363

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Overall Hospital Rating	48.56	7.347	.059	-.357	.092	.212	.178	.157	-.362	.022
Predictor Value										
1. Faith Based	.18	.382	-	-.264	-.093	-.119	-.055	-.038	-.010	-.056
2. For Profit	.25	.431		-	-.114	-.120	-.067	-.174	.197	-.097
3. Academic	.04	.193			-	.082	-.024	.195	.151	-.059
4. Most Wired™	.20	.397				-	.120	.098	-.209	-.145
5. Baldrige	.01	.117					-	.133	-.019	-.035
6. MAGNET™	.09	.280						-	-.056	-.090
7. Safety Net	.48	.500							-	-.140
8. Sole Provider	.08	.271								-

Table 472 – Domain 9, Region 9: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.316	(-2.119, 2.752)	.016	.336	.737
For Profit	-4.339	(-6.570, -2.109)	-.254	-5.038	.000
Academic	3.676	(-1.081, 8.432)	.096	2.001	.046
Most Wired™	1.633	(-.705, 3.970)	.088	1.809	.071
Baldrige	8.848	(1.256, 16.440)	.141	3.018	.003
MAGNET™	1.268	(-1.993, 4.529)	.048	1.007	.315
Safety Net	-4.481	(-6.346, -2.616)	-.305	-6.221	.000
Sole Provider	-.456	(-3.798, 2.885)	-.017	-.354	.724

Table 473 – Domain 9, Region 9: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
51.058	51.058 + .316(Faith Based) – 4.339(For Profit) + 3.676(Academic) + 1.633(Most Wired™) + 8.848(Baldrige) + 1.268(MAGNET™) – 4.481(Safety Net) - .456(Sole Provider)	.262	.245	.000

Table 474 – Domain 9, Region 10: Means, Standard Deviations, and Intercorrelations, n = 107

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Care Transitions Predictor Value	51.51	4.366	.033	-.035	.190	-.199	-.123	.104	-.153	-.034
1. Faith Based	.31	.464	-	-.270	-.065	-.139	-.065	.016	-.159	-.069
2. For Profit	.14	.349		-	-.039	.083	-.039	-.122	.041	-.028
3. Academic	.01	.097			-	-.038	-.009	.321	-.033	-.042
4. Most Wired™	.13	.339				-	-.038	-.018	.051	-.017
5. Baldrige	.01	.097					-	.321	.287	-.042
6. MAGNET™	.08	.279						-	.008	-.132
7. Safety Net	.10	.305							-	-.063
8. Sole Provider	.16	.367								-

Table 475 – Domain 9, Region 10: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.152	(-2.671, 2.367)	-.016	-.158	.875
For Profit	-.107	(-3.400, 3.186)	-.009	-.085	.932
Academic	6.579	(-5.522, 18.680)	.146	1.428	.156
Most Wired™	-2.492	(-5.768, .783)	-.193	-1.999	.048
Baldrige	-5.902	(-18.550, 6.747)	-.131	-1.226	.223
MAGNET™	1.428	(-3.056, 5.913)	.091	.837	.405
Safety Net	-1.519	(-5.332, 2.293)	-.106	-1.047	.298
Sole Provider	-.386	(-3.413, 2.642)	-.032	-.335	.739

Table 476 – Domain 9, Region 10: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
51.993	HCAHPS© Score = 51.993 - .152(Faith Based) - .107(For Profit) + 6.579(Academic) – 2.492(Most Wired™) – 5.902(Baldrige) + 1.428(MAGNET™) – 1.519(Safety Net) - .386(Sole Provider)	.109	.036	.169

APPENIDIX R – MULTIPLE REGRESSION ANALYSIS, DOMAIN 10 – OVERALL HOSPITAL RANKING

Table 477 – Domain 10, All Variables: Means, Standard Deviations, and Intercorrelations, N = 3089

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Overall Hospital Rating	69.36	8.076	.140	-.231	.047	.099	.061	.194	-.299	-.063
Predictor Value										
1. Faith Based	.20	.402	-	-.237	-.063	-.030	.031	.053	-.080	-.078
2. For Profit	.20	.399		-	-.080	.036	-.047	-.133	.102	-.062
3. Academic	.03	.180			-	.094	.002	.203	.062	-.074
4. Most Wired™	.19	.391				-	.017	.147	-.103	-.098
5. Baldrige	.01	.093					-	.080	-.014	-.027
6. MAGNET™	.11	.309						-	-.103	-.098
7. Safety Net	.25	.433							-	-.019
8. Sole Provider	.14	.344								-

Table 478 – Domain 10, All Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	1.404	(.514, 2.294)	.070	4.068	.000
For Profit	-3.519	(-4.422, -2.616)	-.174	-10.045	.000
Academic	.891	(-1.080, 2.861)	.020	1.165	.244
Most Wired™	1.146	(.247, 2.046)	.055	3.286	.001
Baldrige	3.017	(-.686, 6.720)	.035	2.100	.036
MAGNET™	3.151	(1.985, 4.317)	.121	6.963	.000
Safety Net	-4.834	(-5.644, -4.025)	-.259	-15.398	.000
Sole Provider	-1.261	(-2.278, -.244)	-.054	-3.197	.001

Table 479 – Domain 10, All Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
70.553	HCAHPS© Score = 70.533 + 1.404(Faith Based) – 3.519(For Profit) + .891(Academic) + 1.146(Most Wired™) + 3.017(Baldrige) + 3.151(MAGNET™) – 4.834(Safety Net) – 1.261(Sole Provider)	.163	.161	.000

Table 480 – Domain 10, Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3089

Variable	*M*	*SD*	1	2	3
Overall Hospital Rating	69.36	8.076	.099	.061	.194
Predictor Value					
1. Most Wired™	.19	.391	-	.017	.147
2. Baldrige	.01	.093		-	.080
3. MAGNET™	.11	.309			-

Table 481 – Domain 10, Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Most Wired™	1.490	(.543, 2.438)	.072	4.054	.000
Baldrige	3.916	(-.031, 7.863)	.045	2.557	.011
MAGNET™	4.705	(3.503, 5.908)	.180	10.087	.000

Table 482 – Domain 10, Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
68.548	HCAHPS© Score = 68.548 + 1.490(Most Wired™) + 3.916(Baldrige) + 4.705(MAGNET™)	.045	.044	.000

Table 483 – Domain 10, Non-Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3089

Variable	*M*	*SD*	1	2	3	4	5
Overall Hospital Rating	69.36	8.076	.140	-.231	.047	-.299	-.063
Predictor Value							
1. Faith Based	.20	.402	-	-.237	-.063	-.080	-.078
2. For Profit	.20	.399		-	-.080	.102	-.062
3. Academic	.03	.180			-	.062	-.074
4. Safety Net	.25	.433				-	-.019
5. Sole Provider	.14	.344					-

Table 484 – Domain 10, Non-Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	1.442	(.544, 2.341)	.072	4.136	.000
For Profit	-3.762	(-4.668, -2.856)	-.186	-10.701	.000
Academic	2.181	(.232, 4.129)	.049	2.884	.004
Safety Net	-5.195	(-6.004, -4.386)	-.278	-16.547	.000
Sole Provider	-1.661	(-2.681, -.640)	-.071	-4.196	.000

Table 485 – Domain 10, Non-Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
71.273	HCAHPS© Score = 71.273 + 1.442(Faith Based) – 3.762(For Profit) + 2.181(Academic) – 5.195(Safety Net) – 1.661(Sole Provider)	.143	.142	.000

Table 486 – Domain 10, Response Rate Low: Means, Standard Deviations, and Intercorrelations, n = 122 (No Baldrige coded 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Overall Hospital Rating	58.14	9.178	.161	-.006	.046	.185	.	.111	-.112	.088
Predictor Value										
1. Faith Based	.12	.330	-	-.204	-.092	.015	.	-.048	-.044	.085
2. For Profit	.23	.422		-	-.135	-.135	.	-.070	-.082	-.154
3. Academic	.06	.234			-	-.061	.	-.032	.081	-.070
4. Most Wired™	.06	.234				-	.	-.032	.081	-.070
5. Baldrige	.00	.000					-			
6. MAGNET™	.02	.128						-	.043	-.036
7. Safety Net	.90	.299							-	.093
8. Sole Provider	.07	.262								-

Table 487 – Domain 10, Response Rate Low: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	4.933	(-1.697, 11.563)	.177	1.949	.054
For Profit	2.065	(-3.275, 7.405)	.095	1.013	.313
Academic	4.515	(-4.809, 13.838)	.115	1.268	.207
Most Wired™	8.953	(.306, 18.212)	.228	2.533	.013
MAGNET™	10.658	(-6.072, 27.387)	.148	1.669	.098
Safety Net	-4.397	(-11.580, 2.786)	-.143	-1.604	.112
Sole Provider	4.561	(-3.726, 12.849)	.130	1.442	.152

Table 488 – Domain 10, Response Rate Low: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
59.739	HCAHPS© Score = 59.739 + 4.933(Faith Based) + 2.065(For Profit) + 4.515(Academic) + 8.953(Most Wired™) + 10.658(MAGNET™) – 4.397(Safety Net) + 4.561(Sole Provider)	.119	.065	.038

Table 489 – Domain 10, Response Rate Medium: Means, Standard Deviations, and Intercorrelations, n = 1531

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Overall Hospital Rating	67.76	7.768	.162	-.286	.120	.109	.058	.222	-.186	-.096
Predictor Value										
1. Faith Based	.20	.398	-	-.231	-.069	-.003	.012	.084	-.069	-.112
2. For Profit	.20	.401		-	-.102	.021	-.045	-.139	.091	-.037
3. Academic	.05	.209			-	.118	-.019	.242	.032	-.084
4. Most Wired™	.19	.391				-	-.005	.163	-.099	-.111
5. Baldrige	.01	.088					-	.042	-.015	-.034
6. MAGNET™	.10	.306						-	-.105	-.099
7. Safety Net	.33	.471							-	-.006
8. Sole Provider	.13	.335								-

Table 490 – Domain 10, Response Rate Medium: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	1.648	(.410, 2.886)	.084	3.433	.001
For Profit	-4.482	(-5.715, -3.249)	-.231	-9.372	.000
Academic	2.293	(-.072, 4.658)	.062	2.501	.012
Most Wired™	1.271	(.035, 2.506)	.064	2.652	.008
Baldrige	3.359	-1.995, 8.714)	.038	1.618	.106
MAGNET™	3.406	(1.776, 5.037)	.134	5.388	.000
Safety Net	-2.321	(-3.337, -1.305)	-.141	-5.891	.000
Sole Provider	-1.597	(-3.033, -.160)	-.069	-2.866	.004

Table 491 – Domain 10, Response Rate Medium: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
68.579	HCAHPS© Score = 68.579 + 1.648(Faith Based) – 4.482(For Profit) + 2.293(Academic) + 1.271(Most Wired™) + 3.359(Baldrige) + 3.406(MAGNET™) – 2.321(Safety Net) – 1.597(Sole Provider)	.159	.155	.000

Table 492 – Domain 10, Response Rate High: Means, Standard Deviations, and Intercorrelations, n = 1437

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Overall Hospital Rating	60.27	9.225	.026	.077	-.088	-.108	.011	-.117	.131	.031
Predictor Value										
1. Faith Based	.21	.411	-	-.244	-.047	-.064	.046	.021	-.071	-.059
2. For Profit	.19	.396		-	-.042	.064	-.051	-.130	.148	-.080
3. Academic	.02	.136			-	.085	.036	.189	.051	-.058
4. Most Wired™	.20	.399				-	.035	.129	-.082	-.093
5. Baldrige	.01	.102					-	.112	.009	-.024
6. MAGNET™	.12	.321						-	-.070	-.105
7. Safety Net	.11	.309							-	.005
8. Sole Provider	.15	.358								-

Table 493 – Domain 10, Response Rate High: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.968	(-.590, 2.525)	.043	1.602	.109
For Profit	1.538	(-.106, 3.182)	.066	2.413	.016
Academic	-4.535	(-9.180, .110)	-.067	-2.518	.012
Most Wired™	-1.916	(-3.493, -.340)	-.083	-3.136	.002
Baldrige	2.370	(-3.730, 8.469)	.026	1.002	.317
MAGNET™	-2.274	(-4.275, -.274)	-.079	-2.932	.003
Safety Net	3.425	(1.398, 5.453)	.115	4.357	.000
Sole Provider	.492	(-1.255, 2.239)	.019	.726	.468

Table 494 – Response Rate High: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
60.023	HCAHPS© Score = 60.023 + .968(Faith Based) + 1.538(For Profit) – 4.535(Academic) – 1.916(Most Wired™) + 2.370(Baldrige) – 2.274(MAGNET™) + 3.425(Safety Net) + .492(Sole Provider)	.046	.041	.000

Table 495 – Domain 10, Region 1: Means, Standard Deviations, and Intercorrelations, n = 131 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Overall Hospital Rating	69.67	7.005	.045	-.461	.055	.039	.	.243	-.119	-.032
Predictor Value										
1. Faith Based	.11	.310	-	-.009	-.082	-.134	.	.068	-.054	-.099
2. For Profit	.15	.361		-	-.101	.063	.	-.175	.101	-.042
3. Academic	.05	.226			-	.027	.	.095	.119	-.068
4. Most Wired™	.24	.427				-	.	.128	-.153	-.092
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.353						-	-.087	-.037
7. Safety Net	.12	.329							-	-.107
8. Sole Provider	.08	.267								-

Table 496 – Domain 10, Region 1: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.623	(-2.969, 4.214)	.028	.343	.732
For Profit	-8.368	(-11.465, -5.271)	-.431	-5.349	.000
Academic	.069	(-4.850, 4.987)	.002	.028	.978
Most Wired™	.608	(-2.048, 3.263)	.037	.453	.651
MAGNET™	3.050	(-.126, 6.226)	.154	1.901	.060
Safety Net	-1.286	(-4.716, 2.144)	-.060	-.742	.460
Sole Provider	-1.168	(-5.328, 2.992)	-.044	-.556	.579

Table 497 – Domain 10, Region 1: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
70.539	HCAHPS© Score = 70.539 + .623(Faith Based) – 8.368(For Profit) + .069(Academic) + .608(Most Wired™) + 3.050(MAGNET™) – 1.286(Safety Net) – 1.168(Sole Provider)	.247	.205	.000

Table 498 – Domain 10, Region 2: Means, Standard Deviations, and Intercorrelations, n = 208

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Overall Hospital Rating	62.82	8.428	-.001	-.060	.133	.200	.037	.498	-.476	-.127
Predictor Value										
1. Faith Based	.13	.332	-	-.080	-.098	-.026	-.037	.032	-.041	-.109
2. For Profit	.04	.204		-	-.055	-.017	-.021	-.046	.026	-.061
3. Academic	.06	.243			-	.183	-.025	.072	.061	-.075
4. Most Wired™	.14	.347				-	-.040	.254	-.096	-.012
5. Baldrige	.01	.098					-	.075	-.061	-.028
6. MAGNET™	.20	.399						-	-.146	-.143
7. Safety Net	.28	.450							-	-.099
8. Sole Provider	.08	.267								-

Table 499 – Domain 10, Region 2: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.889	(-4.451, 2.672)	-.035	-.649	.517
For Profit	-1.394	(-7.132, 4.343)	-.034	-.632	.528
Academic	3.842	(-1.081, 8.765)	.111	2.030	.044
Most Wired™	.781	(-2.739, 4.301)	.032	.577	.565
Baldrige	-1.780	(-13.722, 10.162)	-.021	-.388	.699
MAGNET™	8.528	(5.446, 11.610)	.403	7.196	.000
Safety Net	-8.133	(-10.778, -5.488)	-.434	-7.997	.000
Sole Provider	-3.472	(-7.944, 1.001)	-.110	-2.019	.045

Table 500 – Domain 10, Region 2: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
63.516	HCAHPS© Score = 63.516 - .889(Faith Based) – 1.394(For Profit) + 3.842(Academic) + .781(Most Wired™) – 1.780(Baldrige) + 8.528(MAGNET™) – 8.133(Safety Net) – 3.472(Sole Provider)	.444	.422	.000

Table 501 – Domain 10, Region 3: Means, Standard Deviations, and Intercorrelations, n = 294 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Overall Hospital Rating	67.40	6.753	-.084	-.128	.016	.218	.	.335	-.277	-.009
Predictor Value										
1. Faith Based	.10	.294	-	-.142	-.031	.092	.	.030	.254	-.074
2. For Profit	.16	.367		-	-.029	-.184	.	-.128	-.053	.032
3. Academic	.06	.234			-	.093	.	.310	.100	-.085
4. Most Wired™	.30	.459				-	.	.234	-.108	-.079
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.354						-	-.093	-.079
7. Safety Net	.15	.357							-	.011
8. Sole Provider	.11	.308								-

Table 502 – Domain 10, Region 3: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-1.441	(-4.757, 1.876)	-.063	-1.126	.261
For Profit	-1.652	(-4.249, .944)	-.090	-1.650	.100
Academic	-2.012	(-6.238, 2.214)	-.070	-1.235	.218
Most Wired™	1.791	(-.333, 3.916)	.122	2.186	.030
MAGNET™	5.728	(2.879, 8.576)	.300	5.214	.000
Safety Net	-4.113	(-6.859, -1.368)	-.218	-3.885	.000
Sole Provider	.427	(-2.608, 3.462)	.019	.365	.715

Table 503 – Domain 10, Region 3: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
67.112	HCAHPS© Score = 67.112 – 1.441(Faith Based) – 1.652(For Profit) – 2.012(Academic) + 1.791(Most Wired™) + 5.728(MAGNET™) – 4.113(Safety Net) + .427(Sole Proivder)	.203	.183	.000

Table 504 – Domain 10, Region 4: Means, Standard Deviations, and Intercorrelations, n = 682

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Overall Hospital Rating	69.44	7.533	.214	-.437	.114	.018	.051	.187	-.148	-.045
Predictor Value										
1. Faith Based	.16	.369	-	-.278	-.045	-.032	.050	.084	-.096	-.090
2. For Profit	.31	.463		-	-.107	.184	-.036	-.170	.007	-.060
3. Academic	.02	.156			-	.066	-.009	.254	.009	-.056
4. Most Wired™	.19	.393				-	.043	.015	-.155	-.109
5. Baldrige	.00	.054					-	-.015	-.038	-.019
6. MAGNET™	.07	.253						-	-.116	-.058
7. Safety Net	.33	.469							-	.159
8. Sole Provider	.11	.311								-

Table 505 – Domain 10, Region 4: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	1.706	(-.167, 3.579)	.084	2.353	.019
For Profit	-6.635	(-8.168, -5.103)	-.407	-11.182	.000
Academic	2.341	(-2.052, 6.734)	.048	1.377	.169
Most Wired™	1.324	(-.406, 3.055)	.069	1.977	.048
Baldrige	3.605	(-8.541, 15.750)	.026	.767	.444
MAGNET™	2.484	(-.242, 5.211)	.084	2.354	.019
Safety Net	-1.799	(-3.241, -.356)	-.112	-3.220	.001
Sole Provider	-.683	(-2.840, 1.475)	-.028	-.817	.414

Table 506 – Domain 10, Region 4: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
71.380	HCAHPS© Score = 71.380 + 1.706(Faith Based) – 6.635(For Profit) + 2.341(Academic) + 1.324(Most Wired™) + 3.605(Baldrige) + 2.484(MAGNET™) – 1.799(Safety Net) - .683(Sole Provider)	.238	.229	.000

Table 507 – Domain 10, Region 5: Means, Standard Deviations, and Intercorrelations, n = 526

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Overall Hospital Rating	71.54	7.140	.002	-.127	-.001	.113	.012	.172	-.358	-.074
Predictor Value										
1. Faith Based	.28	.449	-	-.176	-.050	-.021	-.043	.008	-.050	-.081
2. For Profit	.07	.262		-	-.047	-.070	-.035	-.079	.101	-.075
3. Academic	.03	.161			-	.083	-.021	.193	-.015	-.058
4. Most Wired™	.17	.375				-	-.015	.247	-.048	-.027
5. Baldrige	.02	.123					-	.120	.011	-.043
6. MAGNET™	.15	.359						-	-.069	-.045
7. Safety Net	.10	.299							-	-.054
8. Sole Provider	.11	.311								-

Table 508 – Domain 10, Region 5: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.672	(-2.359, 1.016)	-.042	-1.029	.304
For Profit	-2.597	(-5.501, .308)	-.095	-2.311	.021
Academic	-2.165	(-6.867, 2.536)	-.049	-1.191	.234
Most Wired™	1.089	(-.952, 3.129)	.057	1.380	.168
Baldrige	-.546	(-6.654, 5.562)	-.009	-.231	.817
MAGNET™	2.628	(.445, 4.812)	.132	3.113	.002
Safety Net	-8.235	(-10.732, -5.738)	-.345	-8.526	.000
Sole Provider	-2.274	(-4.681, .133)	-.099	-2.442	.015

Table 509 – Domain 10, Region 5: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
72.459	HCAHPS© Score = 72.459 - .672(Faith Based) – 2.597(For Profit) – 2.165(Academic) + 1.089(Most Wired™) - .546(Baldrige) + 2.628(MAGNET™) – 8.235(Safety Net) – 2.274(Sole Provider)	.172	.159	.000

Table 510 – Domain 10, Region 6: Means, Standard Deviations, and Intercorrelations, n = 484 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Overall Hospital Rating	70.67	8.230	.196	-.153	.050	.086	.	.089	-.272	-.138
Predictor Value										
1. Faith Based	.24	.429	-	-.333	-.069	.149	.	.219	-.185	-.140
2. For Profit	.28	.451		-	-.081	.052	.	-.056	.063	-.145
3. Academic	.03	.168			-	.157	.	.153	.105	-.087
4. Most Wired™	.13	.332				-	.	.250	.006	-.160
5. Baldrige	.00	.000					-			
6. MAGNET™	.07	.249						-	-.075	-.134
7. Safety Net	.35	.478							-	-.007
8. Sole Provider	.20	.402								-

Table 511 – Domain 10, Region 6: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	1.586	(.833, 4.004)	.083	1.695	.091
For Profit	-2.314	(-4.532, .096)	-.127	-2.698	.007
Academic	2.558	(-3.110, 8.225)	.052	1.167	.244
Most Wired™	1.251	(-1.652, 4.154)	.051	1.115	.266
MAGNET™	.196	(-3.704, 4.095)	.006	.130	.897
Safety Net	-4.391	(-6.338, -2.444)	-.255	-5.833	.000
Sole Provider	-2.720	(-5.091, -.350)	-.133	-2.968	.003

Table 512 – Domain 10, Region 6: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
72.797	HCAHPS© Score = 72.797 + 1.586(Faith Based) – 2.314(For Profit) + 2.558(Academic) + 1.251(Most Wired™) + .196(MAGNET™) – 4.391(Safety Net) – 2.720(Sole Provider)	.131	.118	.000

Table 513 – Domain 10, Region 7: Means, Standard Deviations, and Intercorrelations, n = 172

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Overall Hospital Rating	71.91	7.128	.245	-.206	.060	.067	.123	.161	-.326	-.262
Predictor Value										
1. Faith Based	.34	.474	-	-.280	-.002	-.058	.251	.052	-.046	-.161
2. For Profit	.13	.341		-	-.075	.188	-.087	-.016	.060	.027
3. Academic	.03	.184			-	.168	.108	.256	.054	-.117
4. Most Wired™	.17	.375				-	.048	.059	.081	-.102
5. Baldrige	.05	.211					-	.019	.030	-.073
6. MAGNET™	.10	.299						-	-.102	-.116
7. Safety Net	.09	.283							-	-.051
8. Sole Provider	.27	.447								-

Table 514 – Domain 10, Region 7: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	2.029	(-.850, 4.908)	.135	1.837	.068
For Profit	-3.242	(-7.159, .675)	-.155	-2.157	.032
Academic	-.226	(-7.483, 7.030)	-.006	-.081	.935
Most Wired™	1.898	(-1.585, 5.381)	.100	1.420	.157
Baldrige	2.123	(-4.060, 8.306)	.063	.895	.372
MAGNET™	2.048	(-2.340, 6.436)	.086	1.216	.226
Safety Net	-8.145	(-12.642, -3.648)	-.323	-4.721	.000
Sole Provider	-3.638	(-6.527, -.749)	-.228	-3.282	.001

Table 515 – Domain 10, Region 7: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
72.748	72.748 + 2.029(Faith Based) – 3.242(For Profit) - .226(Academic) + 1.898(Most Wired™) + 2.123(Baldrige) + 2.048(MAGNET™) – 8.145(Safety Net) – 3.638(Sole Provider)	.258	.222	.000

Table 516 – Domain 10, Region 8: Means, Standard Deviations, and Intercorrelations, n = 121

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Overall Hospital Rating	71.59	9.494	.123	-.140	.062	.185	.052	.132	-.532	-.170
Predictor Value										
1. Faith Based	.21	.412	-	-.210	-.048	-.146	-.048	.115	-.130	-.094
2. For Profit	.20	.400		-	-.045	.233	-.045	-.085	-.123	-.153
3. Academic	.01	.091			-	-.063	-.008	.289	-.023	-.068
4. Most Wired™	.32	.469				-	-.063	-.034	-.095	-.216
5. Baldrige	.01	.091					-	.289	-.023	-.068
6. MAGNET™	.09	.289						-	-.078	-.235
7. Safety Net	.06	.234							-	-.036
8. Sole Provider	.36	.481								-

Table 517 – Domain 10, Region 8: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.003	(-4.727, 4.734)	.000	.002	.999
For Profit	-6.444	(-11.333, -1.555)	-.272	-3.454	.001
Academic	3.241	(-17.967, 24.449)	.031	.401	.690
Most Wired™	3.201	(-.950, 7.352)	.158	2.021	.046
Baldrige	2.241	(-18.967, 23.449)	.021	.277	.782
MAGNET™	.359	(-6.833, 7.551)	.011	.131	.896
Safety Net	-22.491	(-30.538, -14.443)	-.555	-7.324	.000
Sole Provider	-3.782	(-7.893, .330)	-.191	-2.410	.018

Table 518 – Domain 10, Region 8: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
74.399	HCAHPS© Score = 74.399 + .003(Faith Based) – 6.444(For Profit) + 3.241(Academic) + 3.201(Most Wired™) + 2.241(Baldrige) + .359(MAGNET™) – 22.491(Safety Net) – 3.782(Sole Provider)	.400	.357	.000

Table 519 – Domain 10, Region 9: Means, Standard Deviations, and Intercorrelations, n = 364

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Overall Hospital Rating Predictor Value	67.41	8.770	.085	-.362	.093	.222	.167	.277	-.415	-.096
1. Faith Based	.18	.381	-	-.265	-.092	-.118	-.055	-.038	-.009	-.060
2. For Profit	.25	.432		-	-.115	-.121	-.068	-.175	.191	-.079
3. Academic	.04	.193			-	.082	-.024	.195	.152	-.060
4. Most Wired™	.20	.397				-	.121	.098	-.207	-.148
5. Baldrige	.01	.117					-	.133	-.018	-.035
6. MAGNET™	.09	.280						-	-.056	-.091
7. Safety Net	.48	.500							-	-.147
8. Sole Provider	.08	.275								-

Table 520 – Domain 10, Region 9: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.881	(-1.856, 3.618)	.038	.834	.405
For Profit	-4.803	(-7.293, -2.313)	-.237	-4.995	.000
Academic	3.836	(-1.510, 9.183)	.084	1.858	.064
Most Wired™	1.393	(-1.235, 4.021)	.063	1.373	.171
Baldrige	8.549	(.014, 17.084)	.114	2.594	.010
MAGNET™	5.201	(1.536, 8.867)	.166	3.675	.000
Safety Net	-6.620	(-8.715, -4.525)	-.378	-8.184	.000
Sole Provider	-4.286	(-7.984, -.588)	-.135	-3.002	.003

Table 521 – Domain 10, Region 9: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
70.983	70.983 + .881(Faith Based) – 4.803(For Profit) + 3.836(Academic) + 1.393(Most Wired™) + 8.549(Baldrige) _+ 5.201(MAGNET™) – 6.620(Safety Net) – 4.286(Sole Provider)	.345	.331	.000

Table 522 – Domain 10, Region 10: Means, Standard Deviations, and Intercorrelations, n = 107

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Overall Hospital Rating	70.14	6.800	.100	-.120	.142	-.180	-.031	.203	-.189	-.134
Predictor Value										
1. Faith Based	.31	.464	-	-.270	-.065	-.139	-.065	.016	-.159	-.069
2. For Profit	.14	.349		-	-.039	.083	-.039	-.122	.041	-.028
3. Academic	.01	.097			-	-.038	-.009	.321	-.033	-.042
4. Most Wired™	.13	.339				-	-.038	-.018	.051	-.017
5. Baldrige	.01	.097					-	.321	.287	-.042
6. MAGNET™	.08	.279						-	.008	-.132
7. Safety Net	.10	.305							-	-.063
8. Sole Provider	.16	.367								-

Table 523 – Domain 10, Region 10: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.295	(-3.573, 4.162)	.020	.200	.842
For Profit	-1.487	(-6.543, 3.568)	-.076	-.773	.441
Academic	4.808	(-13.771, 23.388)	.068	.680	.498
Most Wired™	-3.226	(-8.255, 1.802)	-.161	-1.685	.095
Baldrige	-3.465	(-22.886, 15.955)	-.049	-.469	.640
MAGNET™	4.121	(-2.764, 11.007)	.169	1.572	.119
Safety Net	-3.726	(-9.580, 2.127)	-.167	-1.672	.098
Sole Provider	-2.307	(-6.955, 2.341)	-.125	-1.304	.195

Table 524 – Domain 10, Region 10: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
71.070	HCAHPS© Score = 71.070 + .295(Faith Based) – 1.487(For Profit) + 4.808(Academic) – 3.226(Most Wired™) – 3.465(Baldrige) + 4.121(MAGNET™) – 3.726(Safety Net) – 2.307(Sole Provider)	.134	.063	.070

APPENIDIX S – MULTIPLE REGRESSION ANALYSIS, DOMAIN 11 – WILLINGNESS TO RECOMMEND HOSPITAL

Table 525 – Domain 11, All Variables: Means, Standard Deviations, and Intercorrelations, N = 3088

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Willingness to Recommend Hospital	69.96	9.443	.159	-.238	.098	.146	.062	.257	-.316	-.163
Predictor Value										
1. Faith Based	.20	.402	-	-.237	-.063	-.030	.031	.053	-.079	-.079
2. For Profit	.20	.399		-	-.080	.036	-.047	-.133	.102	-.062
3. Academic	.03	.180			-	.094	.002	.203	.063	-.074
4. Most Wired™	.19	.391				-	.017	.147	-.103	-.098
5. Baldrige	.01	.093					-	.080	-.014	-.027
6. MAGNET™	.11	.309						-	-.102	-.098
7. Safety Net	.25	.433							-	-.018
8. Sole Provider	.14	.344								-

Table 526 – Domain 11, All Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	1.897	(.896, 2.898)	.081	4.884	.000
For Profit	-4.151	(-5.167, -3.135)	-.176	-10.530	.000
Academic	2.853	(.636, 5.071)	.055	3.317	.001
Most Wired™	2.009	(.997, 3.021)	.083	5.118	.000
Baldrige	2.909	(-1.257, 7.075)	.029	1.800	.072
MAGNET™	4.953	(3.641, 6.265)	.162	9.729	.000
Safety Net	-5.934	(-6.845, -5.023)	-.272	-16.791	.000
Sole Provider	-3.934	(-5.078, -2.790)	-.143	-8.864	.000

Table 527 – Domain 11, All Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
71.391	HCAHPS© Score = 71.391 + 1.897(Faith Based) – 4.151(For Profit) + 2.853(Academic) + 2.009(Most Wired™) + Baldrige(2.909) – 5.934(Safety Net) – 3.934(Sole Provider)	.225	.223	.000

Table 528 – Domain 11, Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3088

Variable	*M*	*SD*	1	2	3
Willingness to Recommend Hospital	69.96	9.443	.146	.062	.257
Predictor Value					
1. Most Wired™	.19	.391	-	.017	.147
2. Baldrige	.01	.093		-	.080
3. MAGNET™	.11	.309			-

Table 529 – Domain 11, Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Most Wired™	2.661	(1.573, 3.748)	.110	6.306	.000
Baldrige	4.120	(-.410, 8.650)	.041	2.344	.019
MAGNET™	7.262	(5.882, 8.642)	.238	13.565	.000

Table 530 – Domain 11, Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
68.648	HCAHPS© Score = 68.648 + 2.661(Most Wired™) + 4.120(Baldrige) + 7.262(MAGNET™)	.080	.079	.000

Table 531 – Domain 11, Non-Application Variables: Means, Standard Deviations, and Intercorrelations, N = 3088

Variable	*M*	*SD*	1	2	3	4	5
Willingness to Recommend Hospital	69.96	9.443	.159	-.238	.098	-.316	-.163
Predictor Value							
1. Faith Based	.20	.402	-	-.237	-.063	-.079	-.079
2. For Profit	.20	.399		-	-.080	.102	-.062
3. Academic	.03	.180			-	.063	-.074
4. Safety Net	.25	.433				-	-.018
5. Sole Provider	.14	.344					-

Table 532 – Domain 11, Non-Application Variables: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	1.943	(.921, 2.966)	.083	4.900	.000
For Profit	-4.506	(-5.537, -3.475)	-.191	-11.267	.000
Academic	4.925	(2.709, 7.142)	.094	5.728	.000
Safety Net	-6.519	(-7.440, 5.598)	-.299	-18.248	.000
Sole Provider	-4.570	(-5.730, -3.410)	-.166	-10.152	.000

Table 533 – Domain 11, Non-Application Variables: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
72.548	HCAHPS© Score = 72.548 + 1.943(Faith Based) – 4.506(For Profit) + 4.925(Academic) – 6.519(Safety Net) – 4.570(Sole Provider)	.189	.188	.000

Table 534 – Domain 11, Response Rate Low: Means, Standard Deviations, and Intercorrelations, n = 122 (No Baldrige coded 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Willingness to Recommend Hospital	57.35	10.783	.120	-.056	.103	.186	.	.152	-.005	.081
Predictor Value										
1. Faith Based	.12	.330	-	-.204	-.092	.015	.	-.048	-.044	.085
2. For Profit	.23	.422		-	-.135	-.135	.	-.070	-.082	-.154
3. Academic	.06	.234			-	-.061	.	-.032	.081	-.070
4. Most Wired™	.06	.234				-	.	-.032	.081	-.070
5. Baldrige	.00	.000					-			
6. MAGNET™	.02	.128						-	.043	-.036
7. Safety Net	.90	.299							-	.093
8. Sole Provider	.07	.262								-

Table 535 – Domain 11, Response Rate Low: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	4.519	(-3.327, 12.365)	.138	1.509	.134
For Profit	1.241	(-5.079, 7.560)	.049	.514	.608
Academic	7.069	(-3.966, 18.103)	.153	1.678	.096
Most Wired™	9.994	(-.963, 20.952)	.216	2.389	.019
MAGNET™	15.211	(-4.587, 35.010)	.180	2.013	.047
Safety Net	-1.545	(-10.045, 6.956)	-.043	-.476	.635
Sole Provider	4.652	(-5.156, 14.459)	.113	1.242	.217

Table 536 – Domain 11, Response Rate Low: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
56.333	HCAHPS© Score = 56.333 + 4.519(Faith Based) + 1.241(For Profit) + 7.069(Academic) + 9.994(Most Wired™) + 15.211(MAGNET™) – 1.545(Safety Net) + 4.652(Sole Provider)	.107	.052	.069

Table 537 – Domain 11, Response Rate Medium: Means, Standard Deviations, and Intercorrelations, n = 1568

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Willingness to Recommend Hospital	68.00	9.000	.181	-.299	.168	.163	.060	.292	-.228	-.194
Predictor Value										
1. Faith Based	.19	.396	-	-.230	-.071	.000	.012	.083	-.076	-.111
2. For Profit	.20	.401		-	-.104	.017	-.044	-.138	.087	-.040
3. Academic	.05	.212			-	.109	-.020	.232	.041	-.085
4. Most Wired™	.19	.390				-	-.005	.161	-.101	-.110
5. Baldrige	.01	.087					-	.043	-.018	-.034
6. MAGNET™	.10	.304						-	-.109	-.098
7. Safety Net	.35	.476							-	-.006
8. Sole Provider	.13	.334								-

Table 538 – Domain 11, Response Rate Medium: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	1.982	(.630, 3.333)	.087	3.781	.000
For Profit	-5.281	(-6.620, -3.941)	-.235	-10.168	.000
Academic	3.905	(1.378, 6.433)	.092	3.985	.000
Most Wired™	2.158	(.811, 3.505)	.093	4.132	.000
Baldrige	3.606	(-2.283, 9.495)	.035	1.579	.115
MAGNET™	5.325	(3.543, 7.107)	.180	7.705	.000
Safety Net	-3.321	(-4.415, -2.226)	-.176	-7.824	.000
Sole Provider	-4.234	(-5.799, -2.670)	-.157	-6.979	.000

Table 539 – Domain 11, Response Rate Medium: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
69.205	HCAHPS© Score = 69.205 + 1.982(Faith Based) – 5.281(For Profit) + 3.905(Academic) + 2.158(Most Wired™) + 3.606(Baldrige) + 5.325(MAGNET™)_- 3.321(Safety Net) – 4.234(Sole Provider)	.242	.238	.000

Table 540 – Domain 11, Response Rate High: Means, Standard Deviations, and Intercorrelations, n = 1436

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Willingness to Recommend Hospital	72.94	8.403	.125	-.214	.063	.104	.059	.228	-.201	-.210
Predictor Value										
1. Faith Based	.21	.411	-	-.244	-.047	-.064	.046	.021	-.070	-.059
2. For Profit	.19	.396		-	-.042	.064	-.051	-.130	.149	-.080
3. Academic	.02	.136			-	.085	.036	.189	.052	-.058
4. Most Wired™	.20	.399				-	.035	.129	-.081	-.093
5. Baldrige	.01	.102					-	.112	.009	-.024
6. MAGNET™	.12	.322						-	-.070	-.105
7. Safety Net	.11	.309							-	.006
8. Sole Provider	.15	.358								-

Table 541 – Domain 11, Response Rate High: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	1.250	(-.080, 2.579)	.061	2.424	.015
For Profit	-3.675	(-5.079, -2.271)	-.173	-6.751	.000
Academic	1.148	(-2.817, 5.112)	.019	.747	.455
Most WiredTM	1.384	(.038, 2.729)	.066	2.652	.008
Baldrige	1.907	(-3.299, 7.113)	.023	.945	.345
MAGNETTM	4.138	(2.430, 5.846)	.158	6.250	.000
Safety Net	-4.217	(-5.952, -2.481)	-.155	-6.266	.000
Sole Provider	-4.582	(-6.074, -3.091)	-.195	-7.924	.000

Table 542 – Domain 11, Response Rate High: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
73.725	HCAHPS© Score = 73.725 + 1.250(Faith Based) – 3.675(For Profit) + 1.148(Academic) + 1.384(Most Wired™) + 1.907(Baldrige) + 4.138(MAGNET™) – 4.217(Safety Net) – 4.582(Sole Provider)	.162	.158	.000

Table 543 – Domain 11, Region 1: Means, Standard Deviations, and Intercorrelations, n = 131 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Willingness to Recommend Hospital	73.08	7.925	.062	-.421	.075	.063	.	.273	-.125	-.090
Predictor Value										
1. Faith Based	.11	.310	-	-.009	-.082	-.134	.	.068	-.054	-.099
2. For Profit	.15	.361		-	-.101	.063	.	-.175	.101	-.042
3. Academic	.05	.226			-	.027	.	.095	.119	-.068
4. Most Wired™	.24	.427				-	.	.128	-.153	-.092
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.353						-	-.087	-.037
7. Safety Net	.12	.329							-	-.107
8. Sole Provider	.08	.267								-

Table 544– Domain 11, Region 1: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	1.046	(-4.358, 6.451)	.041	.506	.613
For Profit	-8.463	(-13.124, -3.803)	-.386	-4.752	.000
Academic	.798	(-6.604, 8.200)	.023	.282	.778
Most Wired™	.898	(-3.097, 4.894)	.048	.588	.557
MAGNET™	4.144	(-.636, 8.924)	.185	2.268	.025
Safety Net	-1.764	(-6.926, 3.398)	-.073	-.894	.373
Sole Provider	-2.895	(-9.156, 3.366)	-.097	-1.210	.229

Table 545– Domain 11, Region 1: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
73.837	HCAHPS© Score = 73.837 + 1.046(Faith Based) – 8.463(For Profit) + .798(Academic) + .898(Most Wired™) + 4.144(MAGNET™) – 1.764(Safety Net) – 2.895(Sole Provider)	.238	.195	.000

Table 546– Domain 11, Region 2: Means, Standard Deviations, and Intercorrelations, n = 208

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Willingness to Recommend Hospital	65.36	9.482	-.011	-.098	.175	.198	.038	.494	-.360	-.177
Predictor Value										
1. Faith Based	.13	.332	-	-.080	-.098	-.026	-.037	.032	-.041	-.109
2. For Profit	.04	.204		-	-.055	-.017	-.021	-.046	.026	-.061
3. Academic	.06	.243			-	.183	-.025	.072	.061	-.075
4. Most Wired™	.14	.347				-	-.040	.254	-.096	-.012
5. Baldrige	.01	.098					-	.075	-.061	-.028
6. MAGNET™	.20	.399						-	-.146	-.143
7. Safety Net	.28	.450							-	-.099
8. Sole Provider	.08	.267								-

Table 547– Domain 11, Region 2: Regression Analysis Summary for Hospital Characteristics Predicting HCAHPS© Scores for All Characteristics

Variable	B	99% CI	β	t	p
Faith Based	-1.307	(-5.534, 2.920)	-.046	-.804	.422
For Profit	-3.530	(-10.340, 3.280)	-.076	-1.348	.179
Academic	5.441	(-.402, 11.284)	.139	2.422	.016
Most Wired™	.913	(-3.265, 5.091)	.033	.568	.570
Baldrige	-1.441	(-15.616, 12.734)	-.015	-.264	.792
MAGNET™	9.648	(5.990, 13.307)	.406	6.859	.000
Safety Net	-6.782	(-9.922, -3.643)	-.322	-5.619	.000
Sole Provider	-5.321	(-10.630, -.012)	-.150	-2.607	.010

Table 548– Domain 11, Region 2: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
65.617	HCAHPS© Score = 65.617- 1.307(Faith Based) – 3.530(For Profit) + 5.441(Academic) + .913(Most Wired™) – 1.441(Baldrige) + 9.648(MAGNET™) – 6.782(Safety Net) – 5.321(Sole Provider)	.381	.356	.000

Table 549 – Domain 11, Region 3: Means, Standard Deviations, and Intercorrelations, n = 294 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Willingness to Recommend Hospital	67.96	8.677	-.037	-.180	.099	.263	.	.402	-.268	-.134
Predictor Value										
1. Faith Based	.10	.294	-	-.142	-.031	.092	.	.030	.254	-.074
2. For Profit	.16	.367		-	-.029	-.184	.	-.128	-.053	.032
3. Academic	.06	.234			-	.093	.	.310	.100	-.085
4. Most Wired™	.30	.459				-	.	.234	-.108	-.079
5. Baldrige	.00	.000					-			
6. MAGNET™	.15	.354						-	-.093	-.079
7. Safety Net	.15	.357							-	.011
8. Sole Provider	.11	.308								-

Table 550 – Domain 11, Region 3: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.836	(-4.936, 3.264)	-.028	-.529	.597
For Profit	-2.980	(-6.190, .229)	-.126	-2.408	.017
Academic	-.223	(-5.447, 5.000)	-.006	-.111	.912
Most Wired™	2.548	(-.078, 5.175)	.135	2.516	.012
MAGNET™	8.070	(4.549, 11.591)	.329	5.943	.000
Safety Net	-5.355	(-8.748, -1.961)	-.221	-4.092	.000
Sole Provider	-2.630	(-6.381, 1.122)	-.093	-1.818	.070

Table 551 – Domain 11, Region 3: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
67.664	HCAHPS© Score = 67.664 - .836(Faith Based) – 2.980(For Profit) - .223(Academic) + 2.548(Most Wired™) + 8.070(MAGNET™) – 5.355(Safety Net) – 2.630(Sole Provider)	.262	.244	.000

Table 552 – Domain 11, Region 4: Means, Standard Deviations, and Intercorrelations, n = 682

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Willingness to Recommend Hospital	69.64	8.754	.249	-.423	.164	.097	.052	.255	-.264	-.153
Predictor Value										
1. Faith Based	.16	.369	-	-.278	-.045	-.032	.050	.084	-.096	-.090
2. For Profit	.31	.463		-	-.107	.184	-.036	-.170	.007	-.060
3. Academic	.02	.156			-	.066	-.009	.254	.009	-.056
4. Most Wired™	.19	.393				-	.043	.015	-.155	-.109
5. Baldrige	.00	.054					-	-.015	-.038	-.019
6. MAGNET™	.07	.253						-	-.116	-.058
7. Safety Net	.33	.469							-	.159
8. Sole Provider	.11	.311								-

Table 553 – Domain 11, Region 4: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	2.537	(.481, 4.592)	.107	3.188	.002
For Profit	-7.374	(-9.057, -5.692)	-.390	-11.324	.000
Academic	4.598	(-.223, 9.420)	.082	2.464	.014
Most Wired™	2.692	(.793, 4.591)	.121	3.662	.000
Baldrige	3.272	(-10.057, 16.602)	.020	.634	.526
MAGNET™	4.444	(1.452, 7.436)	.129	3.836	.000
Safety Net	-3.724	(-5.307, -2.140)	-.200	-6.075	.000
Sole Provider	-3.083	(-5.451, -.715)	-.110	-3.363	.001

Table 554 – Domain 11, Region 4: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
72.114	HCAHPS© Score = 72.114 + 2.537(Faith Based) – 7.374(For Profit) + 4.598(Academic) + 2.692(Most Wired™) + 3.272(Baldrige) + 4.444MAGNET™) – 3.724(Safety Net) – 3.083(Sole Provider)	.320	.312	.000

Table 555 – Domain 11, Region 5: Means, Standard Deviations, and Intercorrelations, n = 526

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Willingness to Recommend Hospital	71.33	8.643	.031	-.174	.072	.166	.035	.265	-.338	-.134
Predictor Value										
1. Faith Based	.28	.449	-	-.176	-.050	-.021	-.043	.008	-.050	-.081
2. For Profit	.07	.262		-	-.047	-.070	-.035	-.079	.101	-.075
3. Academic	.03	.161			-	.083	-.021	.193	-.015	-.058
4. Most Wired™	.17	.375				-	-.015	.247	-.048	-.027
5. Baldrige	.02	.123					-	.120	.011	-.043
6. MAGNET™	.15	.359						-	-.069	-.045
7. Safety Net	.10	.299							-	-.054
8. Sole Provider	.11	.311								-

Table 556 – Domain 11, Region 5: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	-.390	(-2.375, 1.595)	-.020	-.508	.612
For Profit	-4.430	(-7.847, -1.014)	-.134	-3.353	.001
Academic	.240	(-5.289, 5.769)	.004	.112	.911
Most Wired™	1.997	(-.402, 4.397)	.087	2.152	.032
Baldrige	.214	(-6.970, 7.397)	.003	.077	.939
MAGNET™	4.892	(2.324, 7.459)	.203	4.926	.000
Safety Net	-9.120	(-12.057, -6.184)	-.315	-8.030	.000
Sole Provider	-4.181	(-7.012, -1.350)	-.151	-3.819	.000

Table 557 – Domain 11, Region 5: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
72.030	HCAHPS© Score = 72.030 - .390(Faith Based) – 4.430(For Profit) + .240(Academic) + 1.997(Most Wired™) + .214(Baldrige) + 4.892(MAGNET™) – 9.120(Safety Net) – 4.181(Sole Provider)	.218	.206	.000

Table 558– Domain 11, Region 6: Means, Standard Deviations, and Intercorrelations, n = 483 (No Baldrige code = 1)

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Willingness to Recommend Hospital	70.15	9.903	.277	-.095	.085	.147	.	.161	-.290	-.264
Predictor Value										
1. Faith Based	.24	.429	-	-.334	-.069	.149	.	.219	-.184	-.141
2. For Profit	.28	.451		-	-.081	.051	.	-.057	.065	-.146
3. Academic	.03	.168			-	.157	.	.152	.105	-.087
4. Most Wired™	.13	.333				-	.	.250	.007	-.161
5. Baldrige	.00	.000					-			
6. MAGNET™	.07	.249						-	-.074	-.134
7. Safety Net	.35	.478							-	-.005
8. Sole Provider	.20	.403								-

Table 559 – Domain 11, Region 6: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	3.841	(1.065, 6.616)	.166	3.579	.000
For Profit	-1.092	(-3.639, 1.455)	-.050	-1.109	.268
Academic	4.911	(-1.590, 11.412)	.083	1.954	.051
Most Wired™	1.976	(-1.354, 5.306)	.066	1.535	.125
MAGNET™	1.692	(-2.780, 6.164)	.043	.979	.328
Safety Net	-5.462	(-7.698, -3.225)	-.264	-6.315	.000
Sole Provider	-5.553	(-8.273, -2.832)	-.226	-5.279	.000

Table 560 – Domain 11, Region 6: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
72.073	HCAHPS© Score = 72.073 + 3.841(Faith Based) – 1.092(For Profit) + 4.911(Academic) + 1.976(Most Wired™) + 1.692(MAGNET™) – 5.462(Safety Net) – 5.553(Sole Provider)	.211	.199	.000

Table 561 – Domain 11, Region 7: Means, Standard Deviations, and Intercorrelations, n = 172

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Willingness to Recommend Hospital	71.80	8.273	.241	-.253	.097	.049	.123	.214	-.285	-.376
Predictor Value										
1. Faith Based	.34	.474	-	-.280	-.002	-.058	.251	.052	-.046	-.161
2. For Profit	.13	.341		-	-.075	.188	-.087	-.016	.060	.027
3. Academic	.03	.184			-	.168	.108	.256	.054	-.117
4. Most Wired™	.17	.375				-	.048	.059	.081	-.102
5. Baldrige	.05	.211					-	.019	.030	-.073
6. MAGNET™	.10	.299						-	-.102	-.116
7. Safety Net	.09	.283							-	-.051
8. Sole Provider	.27	.447								-

Table 562 – Domain 11, Region 7: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	1.724	(-1.470, 4.918)	.099	1.407	.161
For Profit	-4.972	(-9.318, -.626)	-.205	-2.982	.003
Academic	.255	(-7.796, 8.306)	.006	.083	.934
Most Wired™	1.533	(-2.331, 5.398)	.070	1.034	.303
Baldrige	2.220	(-4.640, 9.080)	.057	.843	.400
MAGNET™	3.609	(-1.259, 8.477)	.131	1.932	.055
Safety Net	-8.167	(-13.156, -3.177)	-.279	-4.266	.000
Sole Provider	-6.315	(-9.520, -3.109)	-.341	-5.135	.000

Table 563 – Domain 11, Region 7: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
73.590	HCAHPS© Score = 73.590 + 1.724(Faith Based) – 4.972(For Profit) + .255(Academic) + 1.533(Most Wired™) + 2.220(Baldrige) + 3.609(MAGNET™) – 8.167(Safety Net) – 6.315(Sole Provider)	.322	.289	.000

Table 564 – Domain 11, Region 8: Means, Standard Deviations, and Intercorrelations, n = 121

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Willingness to Recommend Hospital	71.86	12.378	.158	-.119	.075	.200	.045	.174	-.540	-.202
Predictor Value										
1. Faith Based	.21	.412	-	-.210	-.048	-.146	-.048	.115	-.130	-.094
2. For Profit	.20	.400		-	-.045	.233	-.045	-.085	-.123	-.153
3. Academic	.01	.091			-	-.063	-.008	.289	-.023	-.068
4. Most Wired™	.32	.469				-	-.063	-.034	-.095	-.216
5. Baldrige	.01	.091					-	.289	-.023	-.068
6. MAGNET™	.09	.289						-	-.078	-.235
7. Safety Net	.06	.234							-	-.036
8. Sole Provider	.36	.481								-

Table 565 – Domain 11, Region 8: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	1.107	(-4.962, 7.175)	.037	.478	.634
For Profit	-7.528	(-13.800, -1.256)	-.244	-3.145	.002
Academic	4.818	(-22.387, 32.023)	.035	.464	.644
Most Wired™	4.487	(-.838, 9.812)	.170	2.208	.029
Baldrige	.818	(-26.387, 28.023)	.006	.079	.937
MAGNET™	2.215	(-7.011, 11.440)	.052	.629	.531
Safety Net	-29.111	(-39.433, -18.788)	-.551	-7.390	.000
Sole Provider	-5.241	(-39.433, -18.788)	-.204	-2.604	.010

Table 566 – Domain 11, Region 8: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
74.967	HCAHPS© Score = 74.967 + 1.107(Faith Based) – 7.528(For Profit) + 4.818(Academic) + 4.487(Most Wired™) + .818(Baldrige) + 2.215(MAGNET™) – 29.111(Safety Net) – 5.241(Sole Provider)	.419	.378	.000

Table 567 – Domain 11, Region 9: Means, Standard Deviations, and Intercorrelations, n = 364

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Willingness to Recommend Hospital	69.05	10.519	.096	-.353	.120	.229	.148	.287	-.425	-.131
Predictor Value										
1. Faith Based	.18	.381	-	-.265	-.092	-.118	-.055	-.038	-.009	-.060
2. For Profit	.25	.432		-	-.115	-.121	-.068	-.175	.191	-.079
3. Academic	.04	.193			-	.082	-.024	.195	.152	-.060
4. Most Wired™	.20	.397				-	.121	.098	-.207	-.148
5. Baldrige	.01	.117					-	.133	-.018	-.035
6. MAGNET™	.09	.280						-	-.056	-.091
7. Safety Net	.48	.500							-	-.147
8. Sole Provider	.08	.275								-

Table 568 – Domain 11, Region 9: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	1.488	(-1.744, 4.719)	.054	1.192	.234
For Profit	-5.314	(-8.254, -2.375)	-.218	-4.682	.000
Academic	6.240	(-.071, 12.551)	.114	2.561	.011
Most Wired™	1.675	(-1.426, 4.777)	.063	1.399	.163
Baldrige	8.551	(-1.523, 18.626)	.095	2.198	.029
MAGNET™	6.488	(2.161, 10.815)	.172	3.883	.000
Safety Net	-8.415	(-10.888, -5.942)	-.400	-8.813	.000
Sole Provider	-6.424	(-10.888, -5.942)	-.168	-3.812	.000

Table 569 – Domain 11, Region 9: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
73.414	HCAHPS© Score = 73.414 + 1.488(Faith Based) – 5.314(For Profit) + 6.240(Academic) + 1.675(Most Wired™) + 8.551(Baldrige) + 6.488(MAGNET™) – 8.415(Safety Net) – 6.424(Sole Provider)	.366	.352	.000

Table 570 – Domain 11, Region 10: Means, Standard Deviations, and Intercorrelations, n = 107

Variable	*M*	*SD*	1	2	3	4	5	6	7	8
Willingness to Recommend Hospital	73.00	8.264	.108	-.141	.130	-.152	-.012	.209	-.198	-.218
Predictor Value										
1. Faith Based	.31	.464	-	-.270	-.065	-.139	-.065	.016	-.159	-.069
2. For Profit	.14	.349		-	-.039	.083	-.039	-.122	.041	-.028
3. Academic	.01	.097			-	-.038	-.009	.321	-.033	-.042
4. Most Wired™	.13	.339				-	-.038	-.018	.051	-.017
5. Baldrige	.01	.097					-	.321	.287	-.042
6. MAGNET™	.08	.279						-	.008	-.132
7. Safety Net	.10	.305							-	-.063
8. Sole Provider	.16	.367								-

Table 571 – Domain 11, Region 10: Regression Analysis Summary

Variable	B	99% CI	β	t	p
Faith Based	.301	(-4.327, 4.929)	.017	.171	.865
For Profit	-2.443	(-8.493, 3.607)	-.103	-1.061	.291
Academic	4.817	(-17.417, 27.051)	.056	.569	.571
Most Wired™	-3.184	(-9.202, 2.833)	-.131	-1.390	.168
Baldrige	-2.018	(-25.258, 21.222)	-.024	-.228	.820
MAGNET™	4.647	(-3.593, 12.886)	.157	1.481	.142
Safety Net	-5.165	(-3.593, 12.886)	-.191	-1.937	.056
Sole Provider	-4.759	(-12.170, 1.840)	-.211	-2.248	.027

Table 572 – Domain 11, Region 10: Covariant, Formula for HCHAPS© Score Predictability of Model, R^2, Adjusted R^2, and Significance

Covariant	Formula	R^2	Adjusted R^2	Sig
74.536	HCAHPS© Score = 74.536 + .301(Faith Based) – 2.443(For Profit) + 4.817(Academic) – 3.184(Most Wired™) – 2.018(Baldrige) + 4.647(MAGNET™) – 5.165(Safety Net) – 4.759(Sole Provider)	.160	.092	.024